Pedic Society Items

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ANNUAL MEETING OF THE PEDIC SOCIETY

The annual meeting of the Pedic Society was held on the 10th day of November, 1908, and was attended by the largest number of members ever at any of the society's meetings. The proceedings evoked lively interest on the part of the members; all the reports of the boards and officers were listened to with much attention. The following officers were elected for the ensuing year:

Elliott W. Johnson, president; Carlton L. Griffin, vice-president; Max Nachbar, secretary; H. H. Moore, treasurer; Edward A. Dahlke, George M. Wedekind and Joseph Renk, members of the advisory board; John H. Callahan, William I. Lafon, Mrs. Anna F. Moyde, Oscar M. Goldberg and Henry Fischer, members of the executive board.

Two very interesting papers were read by Mrs. Anna F. Moyde, of Syracuse, and Joseph Renk, of New York City. These papers are printed at length in this number.

After the meeting a bounteous collation was served and music, singing and dancing indulged in, and most of the members wended their way home in the wee small hours of the morning.

The meeting was unanimously voted as being the most progressive and enjoyable ever held by the society.

CHIRO FEASTS AND PHILOSOPHIZES

The Annual Meeting of the Pedic Society of the State of New York a Brilliant Affair.

Dr. Elliott W. Johnson, Nine Times President, Breaks Into Verse. Songs and Dancing Features of the Evening's Success.

The objects for which the Pedic Society of the State of New York was organized, the elevation of the profession, the promotion of good fellowship and the creation of a better understanding, received a marked impetus at the annual meeting, held at Grand Opera House on Tuesday evening, November 10, 1908.

Beyond a doubt the best interests of the organization lie close to the heart of each member, but on occasions such as these, when an interchange of ideas and hopes and ambitions are made possible among those who otherwise meet infrequently, if at all, every influence is bound to work for good, until the society seems veritably to be on the tip-toe of expectancy for the daily improvement in the status of the profession, so long underrated, but now secure in its position as a calling of dignity.

"What place have the singing of songs, the enjoyment of a banquet

and the exchange of social amenities in the evolution of a profession?" one may ask. The annual meeting was sufficient answer. Some subtle mind, or minds, confident of the appeal to be made through the stomach, had placed the banquet table where a blaze of light threw into charming prominence the abundant delicacies and the surrounding border of hungry, laughing, smiling, bantering members gathered together in pleasant comraderie. Fragments of conversation and the telling of funny incidents floated about, and the following was heard among other bonmots:

"Hollon, Doctor, did you hear about Dr. Johnson?"

"No, what about him?"

"Why, haven't you heard?"

"'Pon my honor, I haven't. Has he discovered gold under the Astor House?"

"No, but he wrote a poem for this occasion. When he changed from his street clothes he put the poem into his hat (so used to talking through his hat, you know), and coming across the ferry his tile blew off. But he was so proud of his literary achievement that he read it to me this afternoon before his hat blew off, and I remember these lines:

That ancient friend of stately mien,
The household cat with eyes of green.
She purrs upon the hearth of nights.
And thinks of food and dreams of nights.
And grins complacent all the while
Bewhiskeredly, so free from guile.
The scientists will all agree
That this feline is much like me.
Nine lives she has—full three times three
Have I accept' the Presidency.

"Where's the joke?"

"The joke's just this. Dr. Johnson wrote the poem before he'd been elected."

As I entered the hall I was greeted by this light badinage. Good fellowship was everywhere apparent.

I had received a circular from Secretary Nachbar to attend the annual meeting. It promised a jolly time, interesting discussions and good lectures, combined with music and song—"a lump of thick and a toothful moist."

I went, I saw, I was conquered. Nothing less than my mother-in-law's funeral will induce me to miss another one. Next to the table of edibles, I was most interested in the platform which held up his Excellency, the President, Dr. Elliott W. Johnson, whose pleasure at seeing such a large gathering showed in his beaming face and his lively manner. His august gavel was about to strike the marble to call the meeting to order, when I modestly entered (*My! but that food lay-out made my mouth water*). Order being called, the secretary read the minutes of the previous meeting (*nothing unusual about that*), then came the roll call of officers and members.

The most interesting part of the meeting was devoted to the President's report. Needless to relate, this report struck the keynote of the society, and if his astute recommendations are followed, great gain and advancement for the association is bound to result. There followed the reports of the chairmen of the different boards and officers, which taken all in all were very satisfactory. (*I never forgot the menu for a moment*). They demonstrated that the society had shown wisdom in its selection of men, who were well qualified to fill the positions allotted them.

After the general detailed business had been disposed of, the fun commenced. Doctors Wedekind and Szymanski opened the ball with a red hot debate. The subject was "Eighteen or Nothing"—chiefly nothing. Dr. Szymanski's (*take a zymole Trokey with that name*) delivery and gestures rivalled Sothern at his worst. His (*he of the unpronounceable name*) histrionic abilities have hitherto been hidden under a bushel and the stage has lost a good actor. As for his opponent, Dr. Wedekind—well, me for him! At times, he put me in mind of a Methodist minister on a rampage. When delivering his side of the argument he would lean forward, spreading his well manicured hands out on the two velvet pillows in front of him, as if he intended to close the argument with prayer. This bit of fun came very close to being the "hit" of the evening (Marquis of Queensbury rules).

After the excitement of this encounter had subsided, the meeting proceeded to the election of officers for the ensuing year. Dr. Elliott W. Johnson was elected for the "steenth" time (*see poem*) by acclamation. Chairman Griffin then appointed two beautiful young ladies to escort the President to the chair. Although the President was somewhat embarrassed (*would you believe it?*) he collected himself blush-

ingly, thanked the young ladies very pleasantly, and said that he could only add to his remarks that old quotation, "How happy he could be with either or t'other dear charmer away." (*I was still waiting to eat and may have balled the quotation up.*)

Doctors Griffin, Moore and Nachbar were also elected by acclamation, and all expressed their appreciation of the compliment paid to them in well chosen remarks. Then followed a most interesting paper, read by Mrs. Anna F. Moyde, of Syracuse, N. Y. This lady is to be highly commended (*my best reportorial style*) for the manner in which she handled her subject—boys keep your eyes open, or the girls will get ahead of you. Mrs. Moyde is an accomplished writer, thoroughly understands her subject and talks it well. Her elocutionary powers are especially good, and I hope that we shall hear from her again this winter. Speaking of Syracuse and Winter, how noticeable was the absence of our old friend, Mrs. Winter, of Syracuse (*how is that for a pun?*). I understand that her absence was due to the preparation she was making for Dr. Reubold's wedding (God bless him. He has the best wishes of us all) and a lawsuit which she has on her hands—both a case of court. (*Catch that one?*)

Following Mrs. Moyde's success, came Dr. Renk with a very interesting paper, which was well delivered and listened to with great interest. After which the meeting adjourned to take up what other matters there were on the (dining) table. (*Here's where your little Chiro got busy*).

Among the other good things was a keg of beer, which had been especially imported by one of our German friends (*blessings on his head*). Whatever kind of beer it was, or wherever it came from, it was great. During the dinner, Doctors Renk and Menzel sang a duet. (Here's where I almost lost that appetite). Both gentlemen sing very little in English (mostly cannibal opera) and it was hard for some to understand just what they were singing about. Renk's tenor and Menzel's bass would at times harmonize like a saw striking a nail in a log of wood (*my apologies to the saw, and the log of wood*). They probably did this intentionally to show how many things they could imitate; if so, they are capital mimics. However, it must have been good, for those who understood it applauded it vociferously. Menzel was so overcome after the song that it took sixteen plates of chicken salad to revive him. Renk's nerve kept him up (*oblivion water for mine*).

This was followed by a piano solo by Miss Edna M. Fischer, daughter of Dr. Henry Fischer. This little lady did herself proud. Her rendition of Mendelssohn's Spring Song was excellent. I could see the budding things where the snow had lately rested. The trill of birds was there, and the running of ice released brooks; the murmur of nature awakening. All this and much more were given birth beneath those flexible fingers, skilled in the poetry of music. It was a pity that the members did not pay more attention to her playing. They missed a treat.

Immediately following Miss Fischer's delightful rendition, a grand cake walk was participated in by all the members, except Papa and Mama Moore, who sat as stately as Coney Island's Carnival King and Queen, enjoying the fun, while Counselor Marks was extending the glad hand to everybody and making them feel at home. Messrs. Erff and Johnson and Mrs. Moyde executed some wonderful steps in this walk. The artistic and easy manner in which they handled their feet demonstrated the fact that they are free from foot troubles. Dr. Walsh gave a very good imitation of a Frenchman, with songs, although he was somewhat handicapped by the anarchist at the piano, who had forgotten the music. The number most to be regretted for the lack of proper accompaniment was the bass solo of Mr. Frank Zenk, a member of the Mendelsohn Society. This gentleman has a rich basso voice, which made one appreciate what he was missing by the bad memory of the aforesaid anarchist. Dancing was indulged in until the small hours.

How pleased all were to see Dr. Hogan, of Albany. He is a great favorite among the members. It was just like him to decline the nomination and propose Dr. Callahan. That is the spirit. Taking everything into consideration, the whole affair was most enjoyable and a decided success. It reflects great credit on the committee; but then Messrs. Jantzen, Dahlke and Nachbar are past masters in this sort of thing. Let's have more. Wake 'em all up! Keep the secretary posted as to your correct address, so that you will receive a circular for the next one.

The spirit of the holidays is every-

where felt. Peace and good will reign in the land, and Chiro, the scribe, extends congratulations to the society for its work and advancement of the past year, and offers good wishes and high hopes for the year to come.

The annual meeting struck a deep chord of good feeling and singleness of purpose among us all. It revealed unanimity of opinion and harmony of thought, which promises well for a Happy New Year of achievement. Long live the Pedic Society of the State of New York.

"THE BLOOD."

By Harry Johnson, M.D.

Lectures delivered before the Pedic Society.

With the progress of knowledge and the accumulation of facts in physiology, the importance of blood in its relations to the phenomena of animal life becomes more and more thoroughly understood and appreciated.

Therefore, ladies and gentlemen, I have chosen this subject for my lecture to-night. If I fail to make my subject clear, and if there are any of you who fail to understand any point, I trust you will not hesitate to ask for a fuller explanation.

The blood is the most abundant and highly organized of the fluids of the body, providing material for the regeneration or repair of lost tissue in all parts, without exception, receiving the products of their waste, and conveying them to proper organs by which they are removed from the system. These processes require on the one hand, constant regeneration of the nutritive constituents of the blood, and on the other the removal of effete matters. Not only does the blood carry food stuffs to the tissues after they have been properly prepared by the digestive organs, but also transports to the tissues oxygen absorbed from the air in the lungs, and in return, in conjunction with the other waste products formed in the process or dissimilation, it carries C O_2 or carbon dioxide back to the lungs, to be exhaled by these organs.

Those tissues in which the processes of nutrition are active, are supplied with blood by vessels, but some, less highly organized, like the epidermis, hair, cartilage, etc, which are called extra-vascula, because they are not penetrated by vessels, are none the less dependent upon the blood as they imbibe nutritive material from the blood of adjacent parts.

The importance of the blood in the process of nutrition is evident, and in animals in which the nutrition is active, death is the immediate result of its abstraction in large quantities. Its importance to life can be readily demonstrated by experments upon the inferior animals; where a large quantity of blood is suddenly drawn from the heart there is an immediate suspension of all the vital processes, and if the blood be then returned to the system, the animal is as suddenly revived. The blood of the body is contained in a practically closed system of tubes, the blood vessels within which it is kept circulating by the force of the heart beat. The large tubes are known as arteries, the small fine ones as capillaries, and those which return the blood to the heart are known as veins.

HISTOLOGICAL STRUCTURE.

The blood is composed of a liquid part, the plasma, in which float a vast number of small bodies invisible to the naked eye, and discernible only through the microscope. These are known as the blood corpuscles. There are at least three different kinds of blood corpuscles, known respectively as the red corpuscles, the white corpuscles, or leucocytes, of which in turn there are a number of different kinds, and the blood plates or blood placks.

PLASMA.

Blood plasma when obtained free from corpuscles is perfectly colorless, in thin layers. The red color of the blood is not due therefore to coloration of the blood plasma, but is caused by the mass of red corpuscles held in suspension in the liquid.

The blood plasma is the fluid of the blood, and holds the corpuscles in

suspension. It is composed of water, organic and inorganic salts, organic nitrogenized, organic non-nitrogenized and excrementitious matter. These substances carried in the plasma assist in nourishing the parts.

RED CORPUSCLES.

The red corpuscles have a nearly circular outline like a piece of coin and most of them have a shallow dimple-like depression on both sides, their shape is therefore that of a bi-concave disk, The average size is 1-3200 of an inch in diameter and about ¼ that in thickness.

When viewed singly by transmitted light, the colored corpuscles do not appear red, but merely of a reddish yellow in arterial blood, or yellowish green in venous blood. When blood is drawn from the vessels, the red disks sink in the plasma; they have a singular tendency to run together and to cohere by their broad surfaces, so as to form cylindrical columns like piles of coins, the piles join themselves together in an irregular net work.

The corpuscles are very soft, flexible and elastic, so that they readily squeeze through apertures and passages narrower than their own diameter, and immediately they reach the larger vessels they resume their proper shape.

The color of the corpuscles is due to an infiltration of the stroma with a coloring matter known as haemoglobin.

FUNCTION OF RED CORPUSCLES.

The red corpuscles by virtue of their haemoglobin are the oxygen carriers. Exposed to the air in the lungs, the haemoglobin combines with the oxygen present in the air, this oxygen the haemoglobin carries to the tissues. These, more greedy of oxygen than itself, rob it of its charge and the reduced haemoglobin hurries back to the lungs for a fresh supply. The color of the blood is dependent upon the combination of the haemoglobin with oxygen; when the haemoglobin has its full complement of oxygen, the blood has a bright red hue; when the amount is reduced it changes to a dark purplish hue. The scarlet blood is usually found in the arteries and the dark purple in the veins.

WHITE CORPUSCLES OF THE BLOOD.

The white colorless corpuscles or leucocytes are few in number compared with the red. Their form is various, but when the blood is first drawn they are round or spheroidal. Measured in this condition they are about 1-2500 of an inch in diameter. They are small pieces of protoplasm containing one or more neuclii. These corpuscles possess the power of spontaneous or ameboid movement as it is known and are capable of changing their form and place. While, when in a state of rest, they assume in general the spheroidal form we find that when they become active they send out various shaped processes, some fine and delicate, others broad and of very irregular shape. We often see after a process has been thrown out, that it becomes larger and larger, the cell body becoming correspondingly smaller until finally the whole cell passes over into the process, thus moving forward. By virtue of this locomotion or power the white blood cells perform certain evolutions within the blood vessels, they escape through their walls and sometimes singly, sometimes in vast numbers, move through lymph space in the surrounding tissues. This is spoken of as the migration of the white corpuscles. In an inflamed area numbers of the white corpuscles are thus drained away from the blood. Again by virtue of their ameboid movements the white corpuscles creep around objects enveloping them within their own substance and so putting them inside themselves they digest them, as it were. As an illustration of this action, in certain diseases in which micro-organisms make their appearance in the blood the white corpuscles take up these organisms into their substance and probably exert an influence over them, which modifies the cause of the disease of which these organisms are the essential cause.

Furthermore, the white corpuscles are not only capable of taking up particles of the blood, but are also capable of giving up modified products to the blood and it follows that these metobolic changes must necessarily affect the composition of the fluid plasma in which they lie.

FORMATION OF BLOOD CLOT.

Blood when drawn from the body

and left to stand at ordinary temperature becomes first of a jell-like consistence, and then separates into clot and serum. First we notice a jellatinous pellicle on top and at the sides until in from seven to sixteen minutes the blood assumes the consistency of jelly. Then upon the surface little clear drops of fluid appear. This is serum. The mass undergoes contraction, and as it does this the serum is gradually expressed till in from ten to twelve hours the separation into clot and serum is complete. The clot consists of the corpuscles entangled in the meshes of fibrine, while the serum contains all the constituents of the plasm except the fibrine.

SUMMARY.

Blood then is a very wonderful fluid, wonderful for being made up of colored corpuscles and colorless fluid, wonderful for its fibrine and power of clotting, wonderful for the many substances, for the proteids, for the ashes or minerals, and for the rest of things which are locked up in the corpuscles and in the serum. But you will not wonder at it when you come to see that the blood is the great circulating market of the body in which all the things that are wanted by all the parts, by the brain, muscles, skin, lungs, liver and kidneys, etc., are bought and sold. What the muscles want they buy from the blood and so with every other organ and tissue. As long as life lasts its buying and selling is forever going on. And this is why the blood is forever on the move, sweeping restlessly from place to place, bringing to each part the things it wants, and carrying away those with which it has done. When the blood ceases to move the market is blocked, and the buying and selling cease, and all the organs die, starved for lack of things which they want, choked by the abundance of things for which they have no longer any need.

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LECTURE.

DELIVERED BY DR. GEO. ERFF, CHAIRMAN BOARD OF EXAMINERS BEFORE THE PEDIC SOCIETY OF THE STATE OF NEW YORK.

THE DEVELOPMENT AND CLASSIFICATION OF CORNS.

I was induced to adopt this subject for the following reasons. In the last issue of the "Pedic Items" there appeared an article entitled, "Corns, How Produced," by one of our rising young members, and which showed the author groping in the dark regarding the subject matter of his article. There also seems to prevail among practitioners in general, and the newer members, in particular, a gross carelessness in properly classifying their work. Thus a simple callus over the first metatarsal-phalangeal articulation may be termed anything from a bone affection to a "hard bunion"; a vascular corn will be called a blood corn, or something just as ridiculous; or an acute bursitis a festered or ulcerated corn, some practitioners even making a distinction between the latter two, etc.

This is all wrong. It makes us appear ridiculous at times. I should like to see the adoption by members of our profession, through the efforts of the society, of a nomenclature suitable to our needs. This would enable the discussion of a case, its condition and exact locality, either orally or in article form, intelligently, without every one hearing or reading the same having a different case, condition or locality in mind.

I trust that you will not expect too much of me, as I do not mean to appear learned or academic, but rather practical. Were I to assume that I was hereby furnishing the sole means whereby you could distinguish the different pathological conditions which constitute the subject matter of this lecture I would be placing myself on a par with the charlatan who professes to teach chiropody in thirty or sixty days. This lecture is merely intended

to give you a few general hints based on observations made in practice, together with such knowledge gleaned from literature on the subject, which I have come across from time to time. I was aided very materially in arriving at some of my conclusions by the use of the lens I exhibited before you some time ago.

As an aid to a proper understanding of the different pathological conditions we are called upon to treat, a knowledge of the anatomy of the different tissues constituting the skin, their relation to each other, both in health and disease, is essential. While by chance you may obtain good results in the treatment of something, the why and wherefor of which, you are not familiar with, neither you nor your patients experience that feeling of confidence in your work, and confidence, gentlemen, is the keystone to a successful career. This confidence, to be lasting, must be based on rationalism not empericism. With these few remarks I will proceed with my subject.

To properly understand the formation of a corn we should first have a knowledge of the reproduction of the epidermic cells themselves.

I have here a rude sketch of a transverse section of the skin with which I will endeavor to elucidate points as I go along. I have depicted but three layers of the epidermis on the sketch, the stratum corneum, stratum granulosum and the stratum mucosum, omitting the stratum lucidum as it performs no particular function in the development of a corn.

It is to the function of the granular layer in the normal reproduction of epidermic cells that I especially want to call your attention. In this layer the epidermic cells undergo a decided change. In this, the mucous layer, the cells are of a soft, moist, mucous character, the formation of which I will explain in a moment. According to Unna, the following changes take place in the cells when they reach the granular layer. The cell becomes filled with graules of different sizes (thus the name, granular layer), composed of kerotohylalin, this substance is peculiar to the process of cornification, he likens it to hyalin, a product of degenerative processes in various tissues, because of the similarity of its chemical behavior. Simultaneous with this change the intercellular protoplasmic material of the cell contracts, the nucleus shrinks and the outer layer of the cell becomes transformed into a horny membrane, in this manner the cell undergoes cornification. It is a generally conceded fact that the epidermic cells originate from material supplied by the liquor sanguinis or plasma of the blood, which is conveyed through the walls of the capillaries to the surface of the basement membrane by endosmosis, where it forms into granules which contain nuclei of unusual size (1-2000 of an inch), compared to that of the granules themselves. These granules, the first organic shape of the future cell, are gradually developed into mucous cells (Wilson). With this brief explanation of the reproduction of the cells I will proceed with the progressive development of a corn.

According to Damon, clavus, tylosis and corn mean the same pathological condition of the skin. It is the various degrees of this condition and the cinical features they present that call for a classification.

In the beginning of a corn there is at first an excitation of the cutaneous nerves, produced in nearly every instance by intermittent pressure or friction. This pressure or friction may be of a slight or severe nature; the progress and the character of the future development are, however, partially determined by it. The area affected, whether it is upon a fleshy, yielding part or where the tissue is superficial and unyielding, as over a bone, have much to do with its character. The excitation of the cutaneous nerves is seconded by an increased vascular supply which congests the derma immediately beneath.

Were this pressure or friction to cease at this time nature would restore the tissues to their normal condition again in a very short time, but as this pressure or friction is continued from day to day, this habitual congestion produces a permanent enlargement or hypertrophy of the papillae of the derma, which is a perfectly natural process. With an enlargement of the papillae the function of those organs is likewise increased with the resulting consequence that a greater amount of nutrition is supplied to that particular area.

Bearing the development of the cells in mind, with an increased amount of nutrition, naturally a more rapid proli-

fication or development of cells take place over the enlarged papillae than over the adjoining ones. This excessive developme t of cell causes an abnoral upward crowding of the preceding cells, with the result that the horny layer of the epidermis gradually becomes thickened. With this thickened layer acting as a counter pressure from above, cornification of the tender cells takes place sooner and more rapidly with each succeeding new layer, and is added to the under portion of that already formed. The growth of the hypertrophy, therefore, takes place at its interior and lateral portion, principally the former at this time.

This process in due time causes the epiderma to become transformed into a dense homogeneous mass of cells constituting a callosity, the size of which is determined by the area of papillae affected.

Have I made myself thus far thoroughly understood? If not, you are at liberty to ask questions and I will try to explain more fully, as I want you to consider this lecture merely an informal talk.

As the factors which have produced this condition of hypertrophy of the papillae and an overgrowth of the epiderma are continued (we might say that from now it feeds on what it produces), that portion, most usually the central, that was formed earliest gradually becomes thicker than the rest in consequence of the greater pressure it is subjected to, and is transformed into a still denser mass than that immediately surrounding it, which gradually assumes the form of an inverted blunted cone, the apex of which, through the constant addition of more cells to its under portion, gradually extends down to and penetrates the derma. This causes progressive atrophy of the papillae to set in, with the result that the papillae underneath at times disappear entirely through absorption. Thus we have the common hard corn.

You might well ask here why, when the papillae underneath have been absorbed, does a corn continue to grow? Its growth is dependent on the increased vascularity of the surrounding integument which is still maintained, but its growth from now on takes place at its lateral portions only. During the formation of a corn it frequently happens that it is subjected to unusual pressure, due to a new shoe or an unusual amount of walking at different times during its development, causing serous effusion or even subcutaneous hemorrhage to occur in minute quantities from the vascular portions of the skin and which is imbibed by the soft, mucous cells which are in process of transition into horny tissue. This imparts to the corn, when formed, a laminated appearance, the laminæ presenting different tints, from a light yellow to a dark red; and while all corns have a more or less laminated arrangement, the laminæ are very much more apparent in these corns.

In connection with the development of corns thus far, I have made no mention regarding the changes which occur in the nerve-filaments in the skin. A condition representing these changes to a marked degree, and to which I wish to call your attention, is the "neurofibrous corn." Sayro. These little neuromata at times become very much enlarged or more voluminous in extent. I have observed that this takes place most often in certain localities, the outer plantar edge at the fifth metatarso-phalangeal articulation and the inner plantar edge of the great toe being most prone to this development.

These corns usually consist of two or three little irregular shaped structures extending down into the derma and in close juxtaposition to each other, the septum dividing these structures being made up of one or more rows of enlarged papillae which have become highly vitalized through the enlarging of the nerve fibres in and about them. In consequence of this condition these corns are the source of considerable pain when great care is not observed while operating on them. I have tried to assign a reason for their development in these particular regions only, as I have rarely found them located anywhere else, and the only solution I can offer is that the large and more elongated papillae found on the plantar surface and which leave off abruptly at the edges of the foot here, to be joined by the smaller ones found on the dorsum and sides, must have some bearing on the matter.

Vascular Corns.—With the clinical features of the vascular corn the majority of you no doubt are familiar, as they possess distinct characteristics, although on a recent occasion a patient, who applied to me for treatment for an ailment of this sort, told me that two other chiropodists whom she had previously consulted told her it was a blood-corn, in one instance, and,

in the other, that it was a corn situated in a blood-vessel.

A vascular corn consists of a cluster of hypertrophied papillæ, the epiderma of which naturally is also excessively developed, forming a round, slightly raised nodule in the skin varying in size from a pin head to a dime, or even larger. The papillæ of this cluster are of various lengths, some even remaining normal, the epidermis of the shorter ones forming a dense mesh in which the longer ones are encased. It is this dense epidermic mesh encasing the papillæ which constitutes the corn. These corns are usually found on the plantar surface of the foot, but in several instances I have found where they have developed in a callus which was of long standing, situated on the dorsum of the little toe. The cause of their appearance is hard to say, but the fact that the papillæ in that part of the foot where they most often occur being larger and more elongated, should not be overlooked in assigning a reason.

Perforating Ulcer.—Another pathological condition often met with in our profession and very apt to be mistaken for a suppurating corn is the perforating ulcer. This process makes its appearance on the plantar surface of the foot, usually over the first or fifth metatarso-phalangeal articulation or on the under surface of the great toe. It is generally associated with a corn or callus and begins with a breaking down of the tissue underneath, forming a dark red or black spot from a pea to a dime in size, which eventually develops into an ulcer. As there is little or no pain connected with it, this process gradually forms a sinus reaching down to and affecting the bones without the patient being aware that he has any serious trouble. It is the absence of pain in connection with this disease that makes it so dangerous and characterizes it from a suppurating corn. When this process has become recognized the patient should be directed to consult a surgeon immediately, as this ailment must be treated on surgical principles, loss of the lower extremity and even death often resulting from this disease. Persons in whom the blood and nerve supply of the foot are deficient, as in locomotor ataxia, syphilis, neuritis, etc., are most prone to its attack.

Soft Corns.—As a rule all affections possessing any characteristic of a corn, when occurring between the toes are classified among the general practitioners as "soft corns," which is erroneous. The typical soft corn possesses distinct characteristic of its own and should be differentiated from the small hard corn which occurs more often between the toes. Up to a certain stage, the formation of a soft corn is identical to that of a hard corn. Either from pressure or friction of one toe against another, the skin over the joint of one toe being antagonized by the prominent head of a bone of the adjoining, becomes slightly inflamed and somewhat thickened, the same as a hard corn, but at this stage of growth a change occurs which determines its character. An effusion of a serous fluid occurs beneath this thickened epidermic layer forming a small, perfectly round, white blister, from a pin head to a pea in size. The epidermis gradually becomes softened from the fluid within and the perspiration without, and a small aperture is formed in the center of the disk through which the serum escapes. In this state it represents a typical soft corn.

The location in which they are most prone to appear you are all familiar with.

While soft corns usually possess characteristics which are not easily mistaken, yet there is another form of lesion met with from time to time in these localities which bear the "earmarks" of being soft corns, that I particularly wish to call your attention to. There are syphilitic lesions. These occur between the toes, not over the articulations as soft corns invariably do, but nearer the dorsal surface of the toes. These lesions may be easily recognized by their peculiar formation, being a perfectly round, slightly elevated, little red ulcerated eminence scarcely the size of a pea, the center having the appearance of having been stamped out, possessing no marked edges characteristic of all non-specific ulcers, but rather being turned in forming a crater-like hole. There is usually a profuse discharge of a thin, colorless, highly infective nature. My attention was first called to this condition some eight or ten years ago. A patient informed me that a friend of his, a clerk in a then prominent hotel, had been inoculated with syphilis by Dr. "So and So," mentioning a well known chiropodist, who had been treating him. Shortly after this incident I was called upon to treat, what ap-

peared to be a soft corn, by a patient of mine, a young man whom I knew was then under treatment for syphilis. Upon examination I found one of these lesions on the side of the fourth toe adjoining the third, which I diagnosed as being of a syphilitic nature a diagnosis, the correctness of which was subsequently verified by his physician whom I afterwards had the pleasure of meeting. Since then I have met about six other such cases, all of which I referred to the patients own physician.

I will not take up any more of your time this evening, and if this lecture should prove to be the means of helping you to a better understanding of the conditions touched upon I shall feel amply repaid for my efforts.

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NEW YORK CITY

Chiropodist

Students prepared for the Pedic Society examinations

December 1st, 1908.

To the Editor :

I cannot understand how, with all the talk indulged in by our President, Dr. Johnson and the Chairman of the Board of Examiners, Dr. Erff, to say nothing of the side remarks of our very genial friend Dr. Jantzen (all of them firing 28 inch shells about ethics, etc.) the Society allows a commercial drummer to get into the annual meeting to advertise a salve or ointment or anything else that smacks of charlatanry or fakism.

As a member of many years standing, I protest against this course of procedure, and I don't care whether two, three or a hundred of our members are interested in the concern which makes the stuff or not. I know nothing about the component parts of barsums gointment or anything like it and I won't use it or anything else in my practice unless I am sure that the combination of chemical constituents is so efficacious as to be indicated for the cure of diseases which come to my notice. Therefore Mr. Editor, cut out the exploitation of these patented (more or less) medicines and rid this profession of quackery and empiricism.

TWENTY YEARS' STANDING.

The following article is taken from a clipping in the scrap book of Mr. John H. Callahan, of Albany. As the author's name does not appear in the scrap book, we are unable to give proper credit for the article. —Editor.

THE FATE OF THE LITTLE TOE.

Will the next century find us an eight-toed race? This is no idle jest, nor is it a flippant inquiry. Civilization has no use for a little toe. As the tails of our arboreal ancestors find no place in the anatomy of their descendants of to-day, so will the little toe of to-day and the past ages of the omnivorous biped wearing breeches become a mere history or a myth of the future scientific treatise.

Habits of walking and the wearing of shoes which make no allowance for the existence of the little toe as a necessary part of the human foot will surely in time, so scientists tell us, lead to its disappearance. It will be

crowded out of sight and there will arise a set of writers in the future who will enter into a controversy over the question whether the human foot so well known to have but four toes ever did have five. Ancient anatomical cuts will be dug up; bits of statues will be shown to establish the truth of the assertion that the race even as late as the nineteenth and twentieth centuries had ten toes. And there will be arguments to disprove the authenticity of the pictures and the statues, and the veracity of the advocates of the ten-toed theory will be questioned.

Our little toes are starvelings. Take them at their best in babyhood and what do they amount to, save to round out the rhyme of, "This Little Pig Went to Market," for the delectation of the infants. They are but apologies for toes. They do not assist the child until he is large enough to have his feet bound in leather, and after that cannot be of use if they would.

Physicians inform us that when the man or woman has reached a certain age the two end joints of the little toe become anchylosed, which is to say united, grown together or hardened so as to be incapable of independent action.

It is not altogether our footwear that shall cause in time the loss of our little toes. The methods of locomotion, whether we are trained athletes or ordinary deformed citizens, are to be held responsible for the passing of the little toe. It is a mooted question whether any but the big toe is needed in locomotion as we understand it now.

Athletic instructors have striven to develop the big toe at the expense of all the others in the production of fast runners or strenuous football players, and the shoes worn have been narrowed till the little toe was put out of business.

In walking the whole weight of the body is thrown away from the outside of the foot upon the inside, chiefly on the big toes. Other parts of the foot may participate in the support of the body to some extent, but the little toe never, except by some accident.

The shoes of the race show considerably more wear on the big toe side than on the little toe side. All and every cause which leads to the further disuse of the little toe will contribute to the gradual decrease in its size and power to be used from generation to generation till about the twenty-first century, when there will be only eight-toed men and women.

This process of evolution will be, according to a scientic authority, somethink like this. The anchylosed joints of the little toe, now so common among adults of a certain age, will begin to appear in the newly born babe. In another generation after that the step from the anchylosed to to the web toe will be taken. This little toe will be united to the next neighbor by membraneous tissue or cartilage. With each succeeding generation the little toe will become smaller until it ceases to be a toe at all, and is only the site or stump where a toe might have been.

This, then, is the fate of the little toe and the ten-toed race.

PES PLANUS—DISJOINTED.

To Him Who Buildeth up the Pedic Society Items, Greeting:

In the Items for September, 1908, I found among a number of writings from the prolific pen of one of our fellow-members, a writing in which he scored me most severely, it seemed to me, for having had the audacity to make mention of a very few ideas I had on the subject of which he wrote.

It seems to me, if I am allowed to have an opinion, that the aforesaid audacity had the effect of ruffling his usually easy going and good-natured disposition. He (it seemed to my poor, weak distorted and warped judgment), getting quite angry with my writing. If that is so, I most humbly beg to apologize if I have said anything which in any manner disturbed his tranquility, or anything else he may have that has been disturbed, disarranged or put off the even tenor of its way.

My dear kind fellow-member starts his chastisement with a very delightful story of a woman eating a lamb's tongue and thereby winning a quantity of Tiffany jewels and the admiration of a number of men.

I enjoyed it very, very much. I am sure he knew I would. I am sorely hurt at some of the unkind remarks my dear, kind fellow-member has

made regarding me. I will mention a few.

First, that which hurt me most cruelly was his remark that I needed an interpreter so I could understand the stamp of "truth" so conspicuously displayed in his writing. I know I am a foreigner in name, but that is not my fault; some one else is to blame for that.

My dear, kind fellow-member has knocked me about most unmercifully (a regular game of ham—I mean hand ball). His written words were not like the music that the soft spring breeze breathes through the gaunt pine forests, but was like unto the angry lashing of the great roaring gales of the Bosphorus. I am truly sorry that I did not notice that my dear, kind fellow-member was shouting in the class of the "they say people," when I made some of my harmless remarks. As I said, I am most truly sorry and humbly kow-tow to my learned fellow-member.

My dear, kind fellow-member stuck out his tongue on the Great White Way (since I have moved to the country I do not know whether it is white or black), and wriggling one's tongue there is apt to result in harm to the owner, especially in cold or dripping weather. I am sure I wish him all sorts of good, nothing but the best, and if he will pardon me, I must say this—he has run on at a great length, some might think him verbose, but I have nothing but admiration for such a flow of excellent English, quite the stuff for a gormand.

Now, again, I must say I am greatly grieved at the unkind things he has said of me, and that is, that I know nothing about anything, except shoes. For that I am duly grateful. I started to acquire that knowledge when I was of a tender age. (Where my dear, kind fellow-member got his information, I do not know.) I do know that he is of an investigating turn of mind, and usually learns all there is to know of any subject. When I was one year "young," I was often observed trying to bite the jewels off the toes of my shoes, and I have been doing something with shoes ever since.

Now I must desist for I am weary trying to do and not doing well. From reading my dear, kind fellow-member's criticism my brain is in such a whirl that I do not know whether I am going home or coming to business.

The optimist and the pessimist are both right, each from his own point of view, although they differ as the night and day.

At this season we can say that everything seems to breathe a spirit of kindliness, comfort, good-will and good cheer. I thank you one and all for the presents brought (if you have brought any), and wish you all a very Merry Christmas and a healthy, happy and prosperous New Year.

R. P. JANTZEN.

OCTOBER EXAMINATION.

The October examination held by the Board of Examiners was attended by a large class. Most of the applicants showed marked ability, and those who passed are:

Mark Bailey, New York.
Alice N. Barber, New York.
Cecelia Conklin, Watertown.
Leonard Dawson, New York.
Edyth M. Garlock, Schenectady.
Lydia S. Lunt, New York.
Ralph L. Marteau, New York.
Charles Pillone, New York.
Ray H. Qualtrough, Rochester.
Annie J. Reynolds, Ossining.
Abraham Weinstein, New York.
Nathan H. Perskin, New York.

The next examination will be held on the fourth Tuesday of January, 1909, at the Society's meeting rooms, at 8 o'clock P. M.

All applicants for this examination who are entitled to another examination must notify the secretary of the Board of Examiners, R. P. Jantzen, 54 West Twenty-third Street, this city, at least five days before the examination, and applicants who are to take the examination for the first time must file their applications with the secretary, R. P. Jantzen, within the same time. This is necessary so that adequate arrangements can be made for the comfort of applicants.

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FAKE CHIROPODY SCHOOLS.

One of the meanest forms of obtaining money is that practiced by a self-styled teacher of chiropody, whose advertisements in the newspapers are of such alluring nature that scores of victims are induced to part with their money.

I have been in receipt of all kinds of communications from all kinds of people, but not until recently have so many complaints come to me from persons who have attended fake chiropody schools with a view to passing the examination, that I concluded to conduct a quiet investigation on my own acount.

From one of the victims (a foreigner unable even to understand the English language) I procured the entire course of instruction. This consisted of about fifty pages of closely typewritten paragraphs of questions and answers in anatomy, physiology, therapeutics, chemistry and minor surgery.

There are some nine hundred questions and answers in this alleged chiropody course, and the victim apprised me of the fact that he had paid $50.00 to the alleged teacher, and that was all he received for his money, besides the assurance that when he learned the questions and answers he would be well qualified to pass the Pedic examination.

The man stated that he had studied faithfully and learned every one of the questions and answers, yet had failed in three examinations.

On looking over the typewritten sheets, I could easily see why he had failed. The following are some of the questions and answers the fake teacher gives to his students:

What is a bone? A bone is one of the separate pieces of the skeleton of the body.

What are the three classes of bones? Bone skin, marrow and bone proper.

Name the bones of the foot. They are divided into those of the tarsus, 7; metatarsus, 5, and phalanges, 14. Total, 26 bones.

How are the bones of the foot held together? By muscles, tendons and fascia.

What bones enter into the formation of the tarso-metatarsal articulations? Four tarsal bones, viz.: the internal, middle, external cuneiform and the cuboid.

How many muscles situated in the foot? Twenty.

Regarding their form, how many varieties of papillae are there? The upper part has been named Pars Papillaries, and the lower part Pars Recticularis Corii. From its upper part it sends off a vast number of projections called papillæ.

What muscles are found in the skin? Both voluntary and involuntary muscle fibres.

What is a swelling? An elevation or elevated area.

Name the chief uses of epithelium. Protection, secretion, sensation and motion.

What are the uses of nails? The nails are used as organs of touch.

How many layers of the skin are there? Three distinct layers.

Name the principal sense of the skin. The sense of touch.

In which layer of the skin are the capillaries situated? In the papillary layer of the derma.

How is the sensation of pain produced? If one took a sharp instrument, he may perceive its shape and condition, but if the pressure be increased, the ability to perceive its form is lost and instead the sensation of pain is established.

Where do the nerves of the skin terminate? Partly in the epidermis and partly in the cutis vera.

What is the comparative value of salicylic acid and nitric acid as caustics in chiropody? They are very penetration drop or two being sufficient.

For what diseases in chiropody would you use cold as a therapeutic measure? Chilblains, frost bites, or to allay inflammation.

Is iodine an antiseptic? No. It is a counter-irritant.

What is a specific? Distinguishing one specific from another.

What is an astringent? It is a remedy drawing tight by reducing the flaccidity of a part. (Compound of alum.)

What deleterious effect would a bichloride of mercury solution of excessive strength have on a wound? Acts as a corrosive poison.

What is the basis of chemistry? Compounds containing hydrogen, united by oxygen to an electropositive.

What are the forces which act on matter? Heat, gravitation, electricity and muscular energy.

What is a counter-irritant? An agent producing counter-irritation.

What are the symbol, atomic and molecular weight of hydrogen? Symbol, H; atomic or muscular weight, 1.

These answers are absolutely wrong, as are most of the nine hundred, and prove that their author's knowledge of the profession of chiropody is nil.

When one considers that most persons desiring to take up chiropody as a vocation are not burdened with any too much money, and are attracted by alluring advertisements and persuaded by oily tongues to part with their money for a course of tuition which is all wrong, the whole matter can be summed up in a few words. It amounts to nothing more or less than an outrageous swindle.

No wonder the students from such chiropody schools do not pass the examinations. And no wonder that the fakers conducting such an institution wax fat on their victims' money, while for the latter there is only disappointment.

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TREATMENT OF FELONS.

BY ALFRED JOSEPH.

Some time ago I received a communication from a chiropodist asking how to treat a felon on the finger. In reply I told him to send his patient to a surgeon; that the seat of the disease was below the level of the true skin, and, consequently, without the scope of a chiropodist.

On the subject of felons, Prof. A. Hamilton Levings, of the University of Wisconsin, says:

"A felon is an acute pyogenic infection, usually of the palmar surface of the terminal phalanx of the finger—less frequently of the thumb—which has its seat in the sheath of the flexor tendon or in the periosteun. The condition is probably due to a bruise with infection. The latter may occur through the circulation or through an abrasion upon the skin.

"The infection, commencing in the tendon sheath or periosteum, rapidly extends and separates the periosteum from the bone, or the sheath from its tendon, and if allowed to progress causes either necrosis of the bone or sloughing of the tendon. The infection may even extend into the palm, and through the hand to the dorsum, implicating all the sheaths of the flexor tendons, and some of the extensors, very seriously crippling the hand.

"The symptoms are intense throbbing, pain over the seat of the infection, followed by swelling, great tenderness and some constitutional disturbances.

"In treating a felon, hot antiseptic poultices may be applied for twenty-four or thirty-six hours, and if at the end of that time the process shows no signs of abatement, a free incision should be made down to the tendon or bone. After the pus has been discharged and the part thoroughly bathed with a hot solution of carbolic acid, a very narrow strip of gauze may be tucked into the opening to prevent its closing, and a hot antiseptic compress applied. The dressing should be changed daily."

Very recently I was afforded an opportunity of following the pathological process of a painful felon. The application of poultices for forty-eight

hours had no visible effect, so a surgeon was called in to treat the case. After cleansing the finger with a 2½ per cent. carbolic solution, he made a very slight incision, or, more properly speaking, an abrasion, through which he permitted the blood to flow freely.

He explained that while he was a believer in free incisions in cases of felon, yet in old people (the patient was 78 years of age) he always avoided it, because the reparative properties of their blood was at a minimum.

When the bleeding ceased, he cleansed the wound with a 1 per cent. carbolic solution and covered the finger with a double thickness of antiseptic gauze. Over this he wrapped a layer of cotton wool, then bandaged with a one-inch gauze, and instructed the patient to saturate the bandage with a 1 per cent. carbolic solution, as hot as could be borne, for twenty-four hours.

Soon after this was done, local anesthesia set in, although the solution contained less than 1 per cent. carbolic acid.

This treatment was pursued for two days. Thereafter, Balsam of Peru was applied, and in a few days the healing process set in.

A SERIOUS CASE.

BY MAX NACHBAR.

The following serious case came to me for treatment at my office. Mrs. X., aged forty-five years, applied to me for relief from what she termed a soft corn. When I examined her foot I was surprised to see a large bunion, with a decidedly disagreeable and foul discharge oozing from its center. I questioned her closely and from her replies I elicited the following facts. She was a widow, and was an habitual drunkard, as well as a cigarette fiend. My object in questioning her thus closely, was to assist me in my diagnosis of her case. I arrived at this decision: that she was afflicted with a bunion aggravated by a pus excretion resulting from the impurity of her blood, due to her intemperate habits and excesses. I treated the case as follows:

I bathed the foot thoroughly with a bi-chloride of mercury solution of 1-2000. This seemed to arrest the discharge of pus. I then proceeded to remove the callosity surrounding the bunion. While handling her foot to do this I found that while it was in a certain position, the exudation was increased materially. I again bathed it thoroughly and applied a wet dressing for several minutes, when the discharge was again check. I then determined to seek the source of this undue secretion. Grasping the foot with my left hand I applied my thumb and forefinger of the right hand at the ankle and drew them firmly and steadily, pressing down to the metatarsal phalangeal articulation, resulting in a copious discharge of pus. I repeated this action several times, washing the orifice of the cavity each time, with the result that the discharge was very materially lessened until it disappeared entirely. As I had never had a case of this kind before, I will confess that I was puzzled as to what treatment to employ that would be the best and most efficacious and secure the most rapid results, as my patient had confided to me that she was not in affluent circumstances. I decided to apply Marchand's $H_2 O_2$ full strength several times. I then covered the entire surface with dermatol and applied a chamois plaster, held with Griswold's salve, which I secured in position with half inch strips of adhesive plaster, and advised the patient under no circumstances to bathe her foot, and to see me again in three days, which she did and when I removed the bandage I found a slight discharge. I repeated my treatment of her first visit drawing the thumb and forefinger down as described, causing a slight discharge without the pain she had experienced previously. I dressed it again as before and advised rest and total abstinence from all spirituous liquors, requesting her to leave the bandage on for a week, and then call on me again. This she did and upon removing the dressing I was agreeably surprised to find no discharge and that there was no exudation resultant from the manipulation of the foot as before. The swelling, redness, as well as the tenderness had entirely disappeared, and the patient could walk comfortably. After redressing the foot I counseled her to leave the bandage on as long as it would remain in position and call at my office again should she suffer any pain. In two weeks she came back and I found the wound had entirely healed,

but noticed a slight indication to flat foot. I suggested that she have a broad, plain toe-shoe made with a long inside counter to support the arch, and discharged her as cured.

This case I deemed serious, and unusual enough to warrant my bringing it to your attention from among those coming to my notice in my limited experience.

MAX NACHBAR.

WE WONDER.

Why Erff is getting so fat.

Where Menzel learned to imitate an Italian.

Why Dahlke interlaces his fingers, palms downward, when talking to a lady.

Where Jantzen got the great feed.

Why Renk didn't tell his stories from the rostrum.

Where Wedekind learned the manly art.

Why Dr. Johnson didn't sing or do a skirt dance.

Why Redell don't raise that mustache.

Where Swanson went after the meeting.

Where the Counselor gets those big cigars.

Why Zenk don't go to see Hammerstein for a job.

Where Pinkus put all that food.

Why Griffin doesn't bring his pretty daughter around oftener.

Where the ptomaines came from.

Why Moore didn't do a buck and wing dance.

Where Fischer lives. He has two nice girls.

Why Galge don't show up oftener.

Why Walch kept his gloves on all evening.

What would have happened in the ante-room had Greek met Greek.

What Hogan thought of the big meeting.

Why Mrs. Moyde didn't lecture before.

Why Groundwater doesn't read a paper on shoes.

Why we can't bring out such a crowd at every meeting.

Why Joseph was so quiet.

Why Stumm was so noisy.

Why the piano player was so good.

Where Ashton Kennedy was.

Why the table was cleaned up so soon.

Why Miss Montrelle don't come to meetings oftener.

SOME REMEDIES AND APPLIANCES OF BENEFIT TO THE PROFESSION

READ AT MEETING OF THE PEDIC SOCIETY.

Mr. President, Ladies and Gentlemen:

The chiropodist desirous of advancing himself in the profession, can find no better medium than a regular attendance at the meetings of the Pedic Society.

In this paper I will describe some remedies and appliances of benefit to the profession. Most of these I learned about at these meetings. Some I discovered myself. But with all of them I have experimented, and have indeed found them very useful.

The first remedy is a colorless liquid labeled "Exine." Regarding its composition I am in doubt. But for removing warts, moles and vascular corns, there is nothing to equal it. Dr. Fred Schmitt informed me of its merits, and the first time I tried it was on a woman's hand. She was possessed of over twenty warts, some of which disappeared after the first application, and the balance after the second. No scar or spot remained.

The method of applying Exine consists of dipping the end of a toothpick into the bottle and simply touching the wart. In a few days the excrescence will have disappeared.

Although I have not as yet experimented with Exine in cases of vascular corns, Dr. Schmitt informs me that it far surpasses either nitric acid, salicylic acid or lunar caustic.

The next remedy I call to your notice is a substance known as "Rosinae Ceratum," very useful in case where we desire to draw out pus. It consists of California rosin, yellow wax and lard. Applied over the unbroken surface of a suppurating process, it acts better than a poultice. After a reasonable length of time the skin breaks and the pus appears.

Rosinæ Ceratum is particularly indicated in cases of suppurating soft corns, and should prove very valuable to all chiropodists.

There is on the market a new antiseptic tablet very suitable for wet

dressings, and also for rendering instruments aseptic. Each tablet contains the following: Mercuric Iodide, 3-8 grain; Acid Boric, 2 grains; Potass. Iodide, ¼ grain; Sodium Bicarbonate, 16 grains.

One tablet dissolved in four ounces of water makes a solution, the mercuric iodide strength of which is 1 in 5000. It does not tarnish metal instruments like bi-chloride of mercury. These tablets are called Antiseptic Disks, and are manufactured by the Norwich Pharmacal Company.

One of the things that tend to increase the business of a chiropodist is the use of neat-looking and serviceable shields. Several chiropodists have built up lucrative practices by this means. I have experimented with felt, chamois, buckskin, doeskin and adhesive plaster shields; but from none did I derive such good results as from the gummed sheepskin, a sample of which I have brought for your inspection. Dr. Henry Fischer is entitled to credit for the fine quality of this shield, devised by him.

For patients with tender soles, or where the heads of the metatarsal bones have only the skin as a covering, the gummed sheepskin shield cannot be equalled. It can readily be taken off and put on again, thus permitting the patient to bathe.

To prepare this shield is a simple matter. How it is done I will describe at the December or January meetings. Meanwhile, if you experiment, you may succeed in producing a better shield.

There is a disease of the foot chiropodists now and then come across, which has no special name. Orthopedic surgeons term it "Pain in the Heel," and that tells the whole story.

Regarding this disorder, Whitman says: "Pain in the bottom of the heel may be caused by the pressure of constant standing, which bruises the tissues underneath the oscalcis. It is also a symptom of the weak-foot. In rare instances it may be due to an inflammation of a small bursa beneath the inner tuberosity, in which a nerve filament is implicated. In the latter instance its removal would be indicated."

I had quite a few such cases (policemen and bartenders are especially subject to this disorder), and while I do not know what causes the pain, have succeeded in effecting a cure in every case by the use of a piece of sheepskin with wool on, a sample of which I have here.

This I cut to fit the heel, and place it in the patient's shoe. Immediate relief results. If worn for about three months the cure is permanent.

Once a week the sheep wool should be washed with soap and water, and allowed to dry.

ALFRED JOSEPH.

New York, Oct. 13, 1908.

FRENCH HEEL WINS ITS VINDICATION

Surgeons Find Epidemic of Broken Foot Arches To Be Due to "Sneaker" Shoes.

Cases of broken arches of the feet of women are increasing in number, and orthopedic surgeons have been keeping the makers of special shoes busy with orders.

Strange as it may seem, the trouble is traced not to the high-heeled footgear which has from time to time been so severely attacked by critics, but to the roomy, easy old shoes, the comfortable slippers and the heelless rubber soled "sneakers" of mountain and camp.

This uncomfortable condition has been observed mostly with women and girls, although many men and boys are also sufferers.

"It could hardly be called an epidemic," said Dr. Virgil P. Gibney, the well-known orthopedic surgeon, "for the cause of the trouble varies in individuals. The foot is made up of a series of small bones in the form of an arch. The weakness of certain ligaments which sustain it ordinarily causes the arch to fall, and the result is what is termed the broken arch, or flatfoot.

"Often the condition is traced to a slight strain, which causes the person affected to favor one foot more than the other, and thus gradually to develop a structural weakness.

"If the race went barefooted there would be no broken arches, for nature causes the foot to maintain the arch. The French shoes, which bring the heel toward the middle of the sole and act

as a support, give to the natives of France a good carriage, which is observed even in the bourgeoisie. They do not have broken arches.

"Easy old shoes, especially if they were badly made originally, and lounging slippers are largely responsible for flatfoot, for when they are worn the ligaments and muscles relax and become weakened."—New York Herald.

THE ACCOMMODATING CHIROPODIST.

He Was Ready to Perjure Himself, Ruin His Reputation, and Wreck His Business to Please a Patient.

It was in September that a patient lator, visions of money flitting across the office of a certain chiropodist not a hundred miles from the City Hall. He declared he had been summering at the seashore, and, not finding it convenient to come to the city, had the toe treated by a physician, but without avail.

The chiropodist proceeded to clean and treat the toe, and soon it took on a more natural appearance. As the bandage was being adjusted, the patient said:

"Say, doc, I want you to do me a favor. I am insured in an accident insurance company, and I'm going to put in a claim. You can say that while you were cutting my corns, I leaned back too far, and the chair tilting, you accidently cut my big toe. I'll get about a hundred dollars out of the company, and I'll make it all right with you. Is it a go?"

"Sure!" exclaimed the foot manipulator, visions of money flitting across his brain.

It happened that a friend of the latter was waiting in the ante-room, and bits of the conversation were conveyed to him. After the patient departed, this man "pumped" the chiropodist, and soon learned what he had agreed to do for his patient.

"So you are willing to perjure yourself?" he inquired. "And for what? To accommodate a man who is trying to cheat an insurance company, in the hope that if he succeeds he will give you a few dollars. But suppose the company gets 'wise,' and refuses to pay the claim, and a lawsuit ensues, you'd make a fine figure on the witness stand testifying to your own incompetency. And that's just precisely what you would have to do—either swear that you cut the patient's toe and thus perjure yourself, or prove that you entered into a conspiracy to beat the company."

By this time the accommodating chiropodist began to realize the trouble that might be in store for him, and, frightened, he sat down and wrote a letter to his patient, telling him that he had consulted his lawyer about that matter, and been advised to steer clear of the proposition.

By some accident, or was it fate, the letter failed to reach the patient for a few days. Meantime, the latter went about with the top of his shoe cut off, and whenever anyone met him and inquired the reason thereof, he invariably stated that he was having his feet treated by Dr. Blank, when the chair tilted and he received a cut in his big toe.

Of course, of the many who heard and believed the story, quite a few made up their minds to steer clear in future of such a careless man as Dr. Blank had proved himself to be. Those that did continue to patronize him would usually begin their conversations with:

"Say, doc, what did you do to Smith's foot?"

And Dr. Blank, with a guilty conscience, would begin:

"Now, I'll tell you how it was!" But the patient in the chair would interrupt by saying: "Oh, you needn't apologize. I know all about it!" and the poor chiropodist fumed and fretted, afraid to reply, not knowing how much the patient knew; and glad to maintain a silence on a subject which was very trying to his peace of mind.

But there was another turn to the affair. Before the letter reached him, the patient had reported his claim to the insurance company, and soon an agent of the latter called on Dr. Blank for a confirmation of the claim.

With a guilty conscience gnawing at his soul, the chiropodist was in a quandary. If he told the truth, he would lose a patient and perhaps get a sound thrashing in the bargain. If he lied, he would be blasting his own

reputation, with a consequent loss of patronage. So, on the plea of being too busy, he requested the agent to call again next day.

In the meantime he sought out his patient, and by him was threatened with dire vengeance if he did not stick to the agreement.

"What do you want to do—put me in jail?" demanded the man with the sore toe.

"No," replied the accommodating chiropodist. "But I don't want to get into trouble. I wouldn't take a hundred dollars and get into such a stew again for anybody."

"Well, you should have thought of that before! We're in it, both of us, and will sink or swim together."

This statement, in place of mollifying the accommodating chiropodist, had the opposite effect; and with the prison gates yawning for him he consulted a lawyer.

Whatever advice he received, he did the best thing he could under the circumstances. When the agent called next day, Dr. Blank declined to make a statement of any kind, nor reply to any question. From this, the insurance company concluded that he had been the cause of their client's injury, and awarded to the latter a small part of the claim—the amount being so small that the chiropodist did not receive a cent. Then the lawyer's fee, and the loss of patronage, besides the worry and time spent in rectifying the matter was the portion allotted to the accommodating chiropodist.

The moral of this story is: Be honest and upright, and cherish your reputation; always remembering that the dollar honestly earned is sweeter than the many procured in questionable transactions.

THE ADVERTISING CHIROPODIST

"One of the things which needs regulating—and the sooner the better—is in the matter of signs and business cards of present-day chiropodists."

As he spoke, the old-timer reached into one of the pigeon-holes of his desk and brought forth a handful of cards.

"I have here some cards of chiropodists which advertise their owners in just the opposite way from that which they intended. Not only bad grammar and ridiculous construction of the English language are employed, but treatments are advertised which no honest chiropodist is entitled to give.

"To show what I mean, just look at some of these cards. Here's a man who advertises: 'Sterilized Instruments and Antiseptic Treatment, Ingrowing Nails, Diseases of the Sweat Glands, Chilblains, Weak Ankles and All Pain in the Feet Cured.'

"Here's another: 'Specialist for Bunions and Ingrown Toe Nails. If you do not suffer, please give this card to your friends.'

"Here's one," said he, holding up a card on which was printed two heavy red crosses and the outlines of a foot.

"This man isn't taking any chances. His card reads: 'Callous Flesh, Hard and Soft Corns Removed, Bunions, Diseased and Ingrown Nails Skillfully Treated and Cured. Immediate Relief. Aseptic Chiropody. Painless Operations. Sterilized Instruments. Diploma T. P. S. S. N. Y.'

"Here is a German, with the union label printed on the face of his card. I'll bet he was a member of the Journeyman Barbers' Union before he became a chiropodist. But the funniest thing about the card are the words: 'Mail orders promptly attended to.' I wonder does he think people are going to send their feet to him by mail. That's what the card leads one to believe.

"Take a peek at this one. He advertises: 'Osteopathy and Surgeon Chiropody. Scientific Body and Face Massage.' I happen to know this man personally. He knows no more about anatomy than does a goat; and to practice osteopathy, one must be thoroughly posted on the location and function of every muscle, nerve and bone in the human body.

"Here is a member of the Pedic Society advertising: 'Crippled Nails a Specialty.' He ought to know better.

"Here's a woman's card which reads: 'Chiropodist and Manicure. Face Treatment and Vibratory Massage. Scalp Treatment and Hair Dressing.' I can see her in my mind's eye cutting the corns of one person and going from that to massaging the face of another.

"Here is a card over five inches wide, printed in two colors, red and black. It reads: "Surgeon Chiropody, Specialist of all Foot Diseases. Chiropody. Painless Operation. Corn, Callouses, Ingrowing Nails, etc., Skillfully treated, removed and cured. Specialist of Electrical Painless Removing of Warts, Hair, Proud Flesh, etc. Highest effectual Electrical treatment of Rheumatism, gout and all Foot

Diseases. Blood Poison Avoided.' Now what do you think of that? Isn't that enough to scare a would-be patient?

"Here's the fellow whose cards read: 'Corns Cured.' I'm going to tear that up. Dr. E. W. Johnson, the President of the Pedic Society, might see it, and his ire would be aroused, and he'd tell you that you might just as well talk about Grand-Opera housing a corn as talk about curing a corn.

"Now there must be something radically wrong with those chiropodists who advertise in such a senseless fashion. To print and circulate cards with such ridiculous statements is fully as humiliating as the sending of sandwich men on the streets proclaiming that 'Dr. Green removes corns and ingrown nails painlessly and instantaneously.'

"The profession of chiropody is an honorable calling, and all element of fakery, quackery and charlatanism should be strictly tabooed; and the sooner it is done, the quicker will those in the business derive the benefit therefrom.

"Every chiropodist should have a business card of small size, neatly printed; and if that card contains the following, it will suffice to instill confidence in those that read it:

TELEPHONE MAIN 1234 HOURS 9 TO 5 SUNDAYS 9 TO 1

JOHN JONES
CHIROPODIST
1234 BROADWAY

CORNER MAIN STREET NEW YORK

MAX DEUTSCH
Shoes that Fit
Arch Supporters
Flat Foot Braces
Orthopedic Shoes
Bunion Protectors
Foot Powder
2655 THIRD AVENUE
NEW YORK
Telephone, 892-L Melrose

CURE OF A LARGE VASCULAR.

Something like five years ago, a strong, healthy young man came to me, saying, "I have something on my foot that is fearfully sore."

Upon examination I found it to be a huge vascular corn. I say huge because it was extremely large. Upon pressing the part laterally between the thumb and finger, or fingers, the lump or bunch of ramifications could be felt to extend well up into the foot. Without exaggeration, this growth was as large as a lima bean and seemingly twice as thick.

This troublesome corn was located on the plantar surface of the fifth metatarsophalangeal joint. I removed the corn portion and applied lunar caustic in the usual way, and protected the part with a well-fitting pad.

The second day this was repeated, and so on for about four weeks. At the end of that time there was a very appreciable lessening in size, but not much relief from the soreness. I then said, "George, you go to your surgeon and ask him if he can't cut that out." He did so, the surgeon telling him, "Stevens couldn't have burnt that out in six months." George also said, "It looked just like a chestnut burr."

About a month after George came back, saying, "That thing is coming back again; what am I going to do?"

I suggested having it treated again as we did previously and perhaps we could eradicate it this time. He allowed me to try, and four treatments completely annihilated the trouble. Today the part is just as smooth and free from trouble as any portion of his foot.

Another case I call to mind. A gentleman from a nearby village came to me with a vascular, the size of which I had not seen before, and have never seen since.

This monster was located directly under the plantar arch, was as large as a medium-sized black walnut, protruding from the foot. It is hard to believe, but true. It also had much the appearance of that nut, on account of caustic having been used.

For ease in walking he had a large opening cut in the shank of his shoe, and a pocket of leather sewed to the sole of the shoe to protect the mass. I examined it carefully and concluded it was not a case for poor me. I advised him to go to a good surgeon and have it removed.

What he did I never learned.

CHARLES F. STEVENS.

Elmira, N. Y.

CHIROPODIST OR MERCHANT?

"What do I think of chiropodists who sell stuff to their patients?" queried the old-timer, elevating his eyebrows, and setting himself comfortably back in a Morris rocker. "Well, I'll tell you. In every profession there is a class known as 'grabbers,' who make a specialty of inducing their patients to purchase such articles as they carry as a side line.

"Such people never benefit a profession. They are, in truth, a detriment. I know any number of chiropodists who sell, for example, foot powder. After they have finished treating a patient's feet, they begin a discourse on the advantages of using their foot powder; and so persistent are they in their arguments that few patients are allowed to depart without purchasing.

"In nine cases out of ten, the stuff is simply a mixture of talcum or chalk with one or two other ingredients, valueless from a therapeutic standpoint, and absolutely without merit.

"But what does the chiropodist care? All he is after is the money. He pays six cents for a box of foot powder and sells it for twenty-five or fifty cents. If he succeeds in disposing of a gross in a month, he adds to his income, pats himself on the back, and imagines himself a great man.

"But there is one thing he loses sight of, and that is that he has lowered himself greatly in the estimation of his patients. The latter have purchased to please him. I might describe the situation by an occurrence the other evening.

"I was standing on the corner waiting for a car, when a tramp approached, and asked me for five cents to get a drink. Always loath to give money for such purposes, I found myself listening to such a clever talk that I eventually 'gave up.'

"That's just why the majority of patients 'give up.' They listen to the chiropodist 'begging' them to buy, and, to get rid of him, purchase an article which they feel sure is worthless.

"Many patients go elsewhere for treatment, rather than submit to what they believe to be an imposition on good nature. O course, the chiropodist misses them after a time, and wonders why they do not patronize him any more. But he never dreams of the real reason. Oh, no. He's too short-sighted for that.

"There are other things some of these chiropodists deal in besides the foot powder, as, for instance, arch supporters for flat feet, corn liquids (which prevent pain), and elastic stockings for varicose veins.

"Then there is the chiropodist who, after having cut the corns and trimmed the nails of his patient, looks up and murmurs: 'Try a foot massage?' It's plain to see he graduated into the profession from a barber's chair, and that the atmosphere thereof still surrounds him.

"Oh, what a difference when these same fellows join the Pedic Society and mingle with the high-minded, simon-pure chiropodists belonging to that body. In a short time they see the error of their way. The respected Dr. A., and the learned Dr. B. do not mix their professions with mercantile pursuits. They are chiropodists who treat only feet; and to sell things to their patients is beneath their dignity as members of an honored profession.

"Then these chiropodist-merchants profit by example. They make an effort to emulate the other members of the Pedic Society, by degrees relegate their wares to the background, and eventually meet with the success which comes to all honorable chiropodists."

R. HEROLD

328 Seventh Avenue

NEW YORK CITY

Expert Instrument Maker

All work guaranteed

Grinding and Sharpening

CAUSTIC POTASH TREATMENT.

The following is another illustration of the very many successful treatments by Dr. Daniel M. Hogan, of Albany, by the use of caustic potash. Editor.

Mr. Myers, a well-known merchant, came limping into my consultation room, complaining of excessive soreness and pain in his left foot.

On examination I found a large and thick callous, fully as large as a silver dollar. This being removed disclosed a wart, a quarter of an inch in diameter, deeply imbedded into the flesh and pressing on the second metatarsus and the connective digit bone.

Mr. Myers had been given five treatments in ten days by a chiropodist who unfortunately did not understand the judicious application of caustic potash. I explained the treatment to Mr. Myers and he consented. I made the application with orange stick, the result being the almost complete decomposition of the wart from the outer presentiment to the deepest central portion.

The treatment occupied about twenty minutes and caused some little pain.

My charge for permanent cure was twenty dollars. The use of the ethel spray during the operation was very successful.

In giving publicity to this case I wish to add that I should be pleased to lecture before the Pedic Society on my results with caustic potash, following up the theme with description of cases and cures since my lecture on the same subject in Buffalo in the year 1901.

DANIEL M. HOGAN.

Albany, N. Y.

DR. FRANK JOHNSON

Chiropodist

126 State Street, Chicago, Ill.

Bunion Shields a specialty. Chiropodists increase your business as Agents for Bunion Shields. Write to-day.

COLOR AND CHEMISTRY.

A Lecture on Scientific Mysteries.

BY J. H. NIEMANN.

The following is an abbreviated reproduction of the paper which was awarded the prize offered by the "Chemist and Druggist of Australasia" for the best outline of a lecture to illustrate "Scientific Mysteries":

Chemistry is such a very wide subject that one cannot do more than treat one branch of it in a single address. I have chosen to treat in a general way some of the parts that color bears in chemistry. This jar contains different liquids mixed up in such a manner that their condition is indicative of chaos. On allowing it to stand for a little while you see order gradually evolved. The chaotic fluid resolves itself into four different liquids, distinguished by their different colors. The ancients believed that the world consisted of four elements—earth, air, fire and water. We know now, however, that each of these is actually composed of a number of different elements. The earth contains over sixty. Water and air also contain a large number—three in practically constant proportions, and a number of others, varying in quantity according to circumstances; while fire is merely the outward and visible sign of certain chemical actions with which we have at present nothing to do. The actual number of known elements amounts to seventy-three, and nature has made each one different in color. Some resemble each other very closely, but there is a difference, apparent on examination, which becomes more strongly marked when seen through the spectroscope, or when each is brought into chemical combination with other elements. This paper has been soaked in a solution of saltpetre and strontia. You see it imparts a rich crimson tint to the flame. This other has been soaked in saltpetre alone, and gives a violet tint. In the first example shown the violet of the saltpetre was obscured by the crimson of the strontia. The spectroscope would separate both colors and enable them to be distinguished, even in the first experiment. The colored fires sometimes used in theatrical performances, etc., are other instances of flames colored by different

chemicals. As the smoke from them is not very agreeable, we will content ourselves with one sample only—a green fire. The green is produced by and is evidence of the presence of nitrate of barium or some other salt of that metal. It is possible to detect a number of chemicals in one flame by means of this little boiler, which contains spirits of wine and four chemicals—nitrate of copper, strontia and barium, and chloride of copper. On boiling the spirit and turning on the tap the steam may be ignited (in this way). The four colors seen—green, red, yellow and blue—are due to the presence of the four chemicals previously mentioned. Sulphur when burned in the air gives (as you see) a scarcely visible flame, but when burned in oxygen it yields a flame of bright blue color, as we will proceed to demonstrate. This leads to the production of and some comments on oxygen. We have seen the effect of oxygen in giving brilliancy to burning sulphur, and you will now see that the effect of burning phosphorus in the gas is quite dazzling. The reason is that oxygen has a powerful affinity for other elements, and the process of chemical combination is frequently a violent one, causing, in the experiments shown, both light and heat. Parents will recognize a resemblance between oxygen and their boys and girls, since they have a powerful affinity for certain of the opposite sex, and when brought together they frequently "go off."

The next illustration over which we will spend a moment is designed to show the effect of a certain gas in destroying color. In this bottle we have some oxide of manganese. When we pour on this chemical some hydrochloric acid (commonly known as "spirits of salts"), and gently heat it chlorine gas is liberated and collects in the smaller bottle. This gas has a strong affinity for and will remove hydrogen from anything containing it with which the chlorine is brought in contact, changing the colors at the same time, even as hydrochloric acid will change the color of your black suit to red, if you should happen to spill some on your clothes. The gas is very poisonous, but is easily mixed with water (in this way), when its properties may be studied with safety. If this chlorine water is placed in a plate and covered with a bell-glass, a colored flower placed under the cover will shortly begin to lose its color, and will, after a while, become quite bleached. A quicker way of showing its action is to put some into this wine and ink. The color, you see, is speedily discharged. We have here in one glass a little hydrochloric acid and in the other some ammonia. Each gives off a little visible gas, but when the two glasses are brought together they are filled with a thick smoke, the invisible chlorine and ammonia combining to form chloride of ammonium. By the way, it has been ascertained that Italian air contains more chloride of ammonium than that of any other country, and Italy is said to owe its large percentage of singers to the effect of this chemical on the voice; an apparatus is, in fact, sold for inhaling it. Local amateurs might take the hint. A neat little bit of parlor magic may be done with glasses charged in this way. Hold them apart, blow the smoke of a cigar between the two, bring the glasses together, pretending to catch the smoke, cover them with a handkerchief, and command the smoke to multiply, which it will do in true conjurer fashion.

We now come to a different series of experiments. The first we will take is as effective as the last, from the parlor conjurer's point of view, and is as easily performed. Red iodide of mercury is rubbed on a piece of paper with a cork and the paper is then held over a lamp until the red color disappears. Now, if any one will call out a word I will write it on the apparently blank paper in blood-red characters with a piece of wood, or anything else handy. The explanation is that heating the chemical melts and flattens its crystals, and when their shape is altered their color is altered also—a good illustration of the fact that the color of any article is not one of its inherent qualities, but is dependent entirely on its ability to absorb certain rays of light and to reflect others. When the crystals are touched they are restored to their original shape and color. I remember startling a worthy old gentleman who handed me a coin to write with when I was performing this trick in public. I mentioned that the color of the writing done with the coin would reveal its previous history, and then when the red writing appeared I proclaimed that the money had been received in payment for blood. He was starting to explain how it came into his possession when I exposed the secret and the joke. The effect of heat on color is made use of in magic inks. This paper has been written on with weak sulphuric acid.

The writing is invisible; but on holding it over the lamp the characters appear in black. The paper is charred, the corrosive action of the acid being developed by the heat. A more effective ink for invisible correspondence is a solution of chloride of cobalt. The writing done with this fluid is also invisible until heat is applied, when, as you see, it appears in blue, to disappear again, however, if it is simply breathed on. An application of the color-changing property of cobalt is to be found in window-panes painted with a solution of the chemical, or fabrics dyed with it, as in the case of this specimen. In dry weather the material is of a blue tint, but when the atmosphere becomes damp it acquires a pink color, a very neat barometer being thus formed. A fine spray of water on this specimen will show you how it acts.

If you are handy with your paint brush you may produce some startling effects by sketching a landscape with solution of bromide of copper, when you will have a representation of a winter scene (as you see). On heating it, however, it is miraculously transformed into a picture of spring, because the trees and grass were afterward painted over with muriate of cobalt, which turns green when heated, and the sky and water with acetate of cobalt, which turns blue. A picture even more interesting, I think, is this engraving of Deeming. This wretched criminal was never known to blush during his lifetime, but his spirit is cast in a different mold. When I point the finger of scorn at this portrait of him (wherein his spirit resides), you see he blushes violently, realizing, no doubt, what a vile creature he is alongside such a superior being as myself. I may as well explain at once, lest you should think there is really something uncanny about the portrait, that its cheeks have been painted with a solution of a chemical bearing the unpretentious name of phenolphthalein—a chemical which possesses the property of turning crimson in the presence of ammonia, some of which I had on my finger. You will observe that the blush disappears when the finger (and ammonia) is withdrawn. I have heard of an itinerant quack who created a sensation by utilizing these chemicals. He held forth somewhat after this fashion: "Ladies and Gentlemen—You see here some poverty stricken blood [an almost colorless solution of phenolphthalein] taken from the veins of a man supposed by the doctors to be dying, but now happily restored to health by my great rejuvenator. The doctors said that his blood had become so poor that he could not live; but they didn't know I was about. When I pour a few drops of my rejuvenator [ammonia] into this worn out stuff, you see it instantly transformed into fine rich blood. This is the way it acted on Mr. Jones, and that is the way it will act on you. Five shillings a bottle, please." And he sold dozens.

The next experiment I have to show you is a conjuring trick introduced by the great Heller, and is somewhat similar in principle to the last. The chemicals be used were different, but the phenol and ammonia might have been used with equal success. On these cards we have a number of ladies' names; one of the audience will please select one and retain it. Now, if some one will step on the platform, I will reproduce on his arm, without touching it, the name on the card. Of course, a few passes must be made in front of it, and the aid of a few magic words invoked. Now, you see, the name has appeared on the arm, and you can see that it is the same as the one on the card. You will be partly prepared for the explanation, which is simple. The cards all had the same name written on them. That name was painted on the arm beforehand with tincture of iron, which became invisible on drying. In my hand I held a little india rubber ball containing a solution of sulphocyanide of potassium, which I sprayed on the iron, producing the blood red writing on the arm. A trick with the spray may be performed by any one as follows: Sprinke over a dry white rose some fine aniline dye (red by preference), the nshake off the bulk of it. What is left will not be noticeable. Then spray some water on the flower and it will be transformed into a colored one, a very small speck of the dye being sufficient to color a quantity of the liquid.

To show the effects o color in analytical work the following experiment may be performed: We have here some solution of prussiate of potash. A little poured into this—solution of sulphate of iron—turns it blue; poured into solution of nitrate of bismuth, the latter turns yellow; white solution of sulphate of copper turns brown. Again, look at the results of the mixture of the contents of these five test tubes. The first one, a colorless solution of

iodide of potash, is poured into a solution of bichloride of mercury, also colorless. The result is the production of a scarlet color, owing to the formation of iodide of mercury. The third tube contains a strong solution of iodide of potash, which possesses the property of redissolving the iodide of mercury. When this clear fluid is added to the contents of the fourth tube, which contains oxalate of ammonium, a white chemical is formed, which is turned black as it comes in contact with the sulphide of ammonium in the fifth tube.

Now, take a sheet of paper and write on it with some solution of sulphate of iron, a practically colorless solution, representing the river-water impregnated with iron. Now, if the writing is sponged over with this solution of tannin it turns black at once, real ink being formed. We will presently see how this combination is utilized by conjurors. But while we are treating of inks I will show you how to produce a blue ink in the same way, with two colorless solutions. On this paper I will write down any suggested word with the solution of iron. After drying it I spray on it a little solution of ferrocyanide of potash. The result, you see, is to produce visible blue letters from invisible ones, a new chemical being formed by the combination of the other two, which is distinguish by a blue precipitate, as the tannate of iron is by a black. Now for the promised cork and emptying it into the water, in conjurer's trick. We have here two bottles, filled respectively with ink and water, and we desire to make them change places. They must be covered with handkerchiefs and the conjurer's wand brought into play. Watch me closely. We will put in the corks, so that nothing can possibly be introduced into the bottles. The magic having worked sufficiently, I lift the handkerchief covering the ink, and we see that the ink is changed to water, with fish swimming in it to show that it is the genuine article. On lifting the other handkerchief we find that the opposite change has taken place—the water being changed to ink. The ink is produced, as you may guess, by having a little bottle of iron concealed in the cork and emptying it into the water, in which some tannin had been previously dissolved. Real ink might have been used for the other bottle and made colorless with oxalic acid or another chemical, but we could not then have displayed the fish; the bottle, therefore, was lined with black silk, which was withdrawn with the handkerchief.

Every one is familiar with the use that is made of blue in the laundry, but not every one stops to think of the reason why it is used. This bottle contains indigo dissolved in dilute sulphuric acid and mixed with some carbonate of potash. Observe the effect it has on these fabrics. The white cloth becomes blue, the red changes to violet and the yellow to green. The blue indigo dissolved in the manner indicated acts on the colors of the fabrics as you have seen, one color blending with another to produce a third. Time is nearly up, but you may have patience enough to give your attention to another trick sometimes performed by conjurers, and based also on chemical color changes—I mean the pouring of a number of different fluids from one bottle. We will fill this bottle up with pure rain water. Now, we will fill up the glasses, putting something different into each. The first is port wine, then comes sherry, then claret; now we have milk, now champagne, and ink. Into the last glass we pour water, to show that there is no deception about this magic bottle. The magic was performed by a little iron I had previously put in the bottle and by small quantities of different chemicals put in the glasses, the iron acting on these developing the various colors. The last illustration I will bring under your notice will be connected with photography, perhaps the most important application of chemical color changes. This photo of a leaf was taken after this fashion: A sheet of paper was brushed over, by candle light, with a solution of citrate of iron and prussiate of potash, then the leaf was laid on the prepared paper, covered with glass and exposed to sunlight. The action of the light darkened the parts of the paper exposed to it and produced the impression.—Adapted from the Chemist and Druggist.

Will you please give me a good formula for an external application for whitening and softening the skin?

The following is a very good formula:

Citric acid, five grains.

Glycerine, one ounce.

Rose water, one ounce.

It may be applied several times a day.

Paper Read at the Annual Meeting Nov. 10, 1908.

A CASE.

BY ANNA P. MOYDE, SYRACUSE, N. Y.

Mr. President, Ladies and Gentlemen:

In submitting this paper to the members of the Pedic Society I have tried to express it as plainly as possible. It was to me a very important case and the treatment will no doubt prove of great value to any one experiencing the same.

On April 20, 1908, Miss M. T., age 30, employed as a saleswoman, called on me for what she thought was a bunion on the right foot.

She had been using a patented Corn Plaster, and thought she had infected her toe; could only walk by limping and had suffered greatly for a week; complained of stiffness and soreness in the ankle and throbbing in the foot, so that it kept her awake nights.

Her previous health had been good. On examination, the foot was found to be discolored, hot and swollen.

The great toe was twice its normal size; the dorsum of the foot puffed with red streaks running upward into the ankle, showing extension of infection.

Situated on the Bursa, covering the first metatarsal phalangeal joint, I found a corn which in removing I punctured the sac of synovial membrane, the contents being bloody and creamy pus.

I cleansed the sac with peroxide of hydrogen and cauterized with 95 per cent. phenol, followed by pure alcohol; and packed with wet dressing of iodoform gauze, and bandaged, warning the patient to rest the foot as much as possible.

Saw her the next day, the discoloration gone and swelling greatly reduced; she complained of little pain.

Each day in cleansing the cavity the sac would appear clean, showing the normal synovial fluid, but in swabbing in a circular motion I would find a pus pocket near the edge of the dorsum of the great toe, which I treated in the same manner as above, cleansing and packing.

I followed this treatment for ten days and then sent the patient to one of our best skin specialists, Dr. H. A. McGruer, and at his suggestion I used a 12 per cent. solution of nitrate of silver, and in case of pain to be followed by a solution of salt, which in this case I did not use, and explained that it was a tedious case to cure.

This treatment I followed until pus pocket was healed.

I kept the packing of gauze in the cavity after each dressing, so as to have it granulate from the bottom rather than to heal by first intention, thereby being sure of a thorough union, which was done after eight weeks' treatment.

Have seen the patient several times since discontinuance of treatment.

She walks back and forth daily from work, a distance of a mile; the foot has perfect motion, and she has suffered no inconvenience since treatment ceased.

I have collected also some matter which I have gotten up in form of interest for my fellow-members.

TANNOFORM AS ANHIDROTIC.

Despite the trivial character of the complaint, hyperidrosis of the hands and feet is often a very disagreeable complaint. In soldiers and those who are obliged to walk a good deal the skin on the flexor surface of the toes and between the toes will often become macerated, thus giving rise to painful fissures and erosions. The excessive secretion of the sweat glands will also decompose and cause a disagreeable odor. In treating this condition, M. Ottenfeld has obtained the best results with tannoform. In mild cases a 10 to 15 per cent. dilution with talcum is dusted upon the feet, while in severer cases it is necessary to use a 20 to 50 per cent. mixture, and to order a rest of several days. The skin will become discolored, but this will disappear in a few weeks. In the presence of eczema, a 10 per cent. ointment will do good service.Deut. Med. Zeit, 1906, No. 67.

Tannoform is a condensation product of tannin and formaldehyde of the formula

$$CH_2(C_{14}H_9O_9)_2$$

It occurs as a bulky, brownish-pink, odorless powder, insoluble in water, but soluble in alcohol or ether. Its

solutions are incompatible with preparations of iron.

MEDICAL PROPERTIES AND USES.

Tannoform is siccative, antiseptic and deodorant. It has proved of service in various skin diseases, such as hyperidrosis, bromidrosis, weeping eczemas, etc., and in fetid ulcers, bedsores, and other conditions requiring siccative and antiseptic treatment.

Tannoform is used externally in substance, or in 10 to 50 per cent., with powdered starch or talcum, or as ointment combined iwth Lanum (Adeps Lanæ Merck), vaseline, or other base.

CLINICAL REPORTS.

Professor Von Mering, who has had much experience with this product says:

"Tannoform, used externally in substance, or in 20 to 50 per cent. with powdered starch, promptly checks excessive sweating. In bromidrosis of the feet, I have repeatedly employed tannoform on the one foot and tannic acid on the other, by way of comparison, and found that the tannin was considerably less active than the tannoform. Compared with salicylic acid—which is the chief remedy heretofore used against this trouble—tannoform proved to be more pleasant and more efficacious. Tannoform is of service also in the treatment of old wounds, such as fetid ulcers of the leg and running eruptions; it also possesses disinfectant properties. It may be used either pure, or mixed with starch or talcum, or as a 10-per-cent. ointment."

Drs. Franck, Carl Ullman, Buck and Moore treated a number of cases of hyperidrosis, and in substance say as follows:

"In hyperidrosis, the best results were obtained by thoroughly washing the affected parts every evening with soap and water—drying well, and then dusting on the powder by means of a piece of flannel or cotton—a thorough rubbing in of the powder appeared to partially tan the skin—and not only check the bromidrosis and hyperidrosis—but also promptly relieve the appearance of maceration—and also the erosions and fissures which so frequently accompany hyperidrosis. The tannoform is hence particularly useful for troops and marines—because of its inocuousness."

"We have not met with a single case of local hyperidrosis that has refused to yield to the action of tannoform. Often its action is in fact so rapid as to render it necessary to exercise caution in its application—since the sudden suppression of a process of secretion to which the system has become accustomed cannot possibly be treated as a matter of total indifference—we therefore consider it desirable to induce diuresis (by means of diuretic decoctions of milk), as well as to produce purgative effects (by means of podophyllin and belladonna, cascarin, etc.) in all cases where the patient—having suffered for a considerable time from hyperidrosis—requires effective treatment. It should be remarked in this connection that excessive secretion of sweat is a particularly frequent affliction of nervous patients suffering from gout and anaemia. It may therefore be advisable to endeavor to modify this constitutional anomaly by means of alkalies—nerve sedatives and tonics."

The use of tannoform in that very troublesome affection—chilblains—had a very favorable influence in my practice. Have also used Tinct. Iodine 2 parts and Tinct. Aconite Radix 1 part on chilblains. It acts like magic in some cases. This is only to be used when the skin is not broken. When the skin is broken have used Ichthyol in various forms. I append some of the formulas I have collected, and I am sure you will find some of them of use and benefit in your practice.

SUGGESTIVE FORMULAS.

1. Tannoform ..... 45 grn.
   Vaseline ..... 1 oz.
   (Ointment for piles—itching surfaces—eczema, etc.)
2. Tannoform ..... 3 dr.
   P wdered talcum..... 6 dr.
   (Dusting powder in intertrigo.)
3. Tannoform ..... 1½ dr.
   Powdered starch..... 1 oz.
   (Dusting powder in acute eczema.)
4. Tannoform ..... 45 grn.
   Starch or talcum..... 1 oz.
   (Powder for dressing burns, etc.)
5. Tannoform ..... 30 grn
   Paraffin ..... 30 to 60 grn.
   Liquid petrolatum.... 9 dr.
   (Emulsion for use in burns, etc.)
6. Tannoform ..... 2 dr.
   Boric acid..... 2 dr.
   Powdered talcum..... 2 dr.
   (Dusting powder in hyperidrosis and bromidrosis.)

Tannoform stains on linen may be readily removed by moistening the spots before washing with a concen-

trated solution of ammonium persulphate.

1. Ichthyol ..... 1 fl. dr.
   Lanolin ..... 1 oz.
   Use daily, always wash parts with lukewarm water and castile soap before applying.
2. Ichthyol ..... 5 fl. dr.
   Chloroform ..... 9 min.
   Lanolin ..... 3 dr.
   (Do not use if skin is broken.)
3. If skin is broken use the following:
   Ichthyol ..... 5 fl. dr.
   Zinc oint..... 3 dr.
4. Ichthyol ..... 1 fl. dr.
   Flexible collodion..... 10 fl. dr.
   Rub the affected part well with spirits of camphor, then apply the paint.
5. Ichthyol ..... 4 fl. dr.
   Oil turpentine..... 4 fl. dr.
6. Ichthyol ..... 1 fl. dr.
   Camphorated oil..... 1 fl. dr.
   Lanolin ..... 4 dr.
   Anoint night and morning and wrap in cotton.
7. Ichthyol ..... 1 fl. dr.
   Balsam Peru..... 1 fl. dr.
   Lanolin ..... 2 dr.
   Apply ointment several times daily.
8. Ichthyol ..... 1 fl. dr.
   Resorcin ..... 1 dr.
   Tannic acid..... 1 dr.
   Water ..... 5 fl. dr.
   Paint on every morning and night. Shake well.

The above formulas are applicable to almost any condition that may arise.

At one of our meetings Dr. Fischer spoke of using white sheepskin as an elegant dressing for the feet. I find that people like it, and I have sold a quantity of it. I will describe my mode of making it. I buy the best gum Arabic (Sears), which cost me 75 cents a pound in my city—you may be able to get it for less money. The sheepskins were sent me from New York by a friend, and cost me about from $1.00 to $1.25 a skin. I brush the flesh side of the skin with a clothes brush to remove all the fuzzy and foreign matter, tack the skin on a board or table so as to have a smooth surface. Then having dissolved my gum in cold water, to which I have added a few drops of carbolic acid, I take a camel's hair brush and apply a thick even coat of gum to the skin. The gum should be of the consistence of good maple syrup. Allow it to dry and it is ready for use. Every one I have used it on has spoken favorably of it. I sell a piece 4x6 inches for a quarter, so you see my skin and gum is a good investment for me and pleases my patients.

I have used it just as one would use buckskin or felt. I would like to call the attention of members to an antiseptic and disinfectant called Lysol. After boiling my instruments in the morning, then I make a solution of Lysol 5 per cent., which I keep in a pus pan in which I put my instruments; it does not corrode them, and it being soapy keeps the instruments clean and sterile. It also has a good effect on the patient, giving him the idea that everything is being done to safeguard him.

I trust that this may be of assistance to some of the members.

MAN.

The average weight of an adult man is 140 pounds 6 ounces.

The average weight of a skeleton is about 14 pounds.

The skeleton measures one inch less than the height of the living man.

The average weight of the brain of a man is 3½ pounds; of a woman, 2 pounds 11 ounces.

The brain of a man exceeds twice that of any other animal.

The average height of an Englishman is 5 feet 9 inches; of a Frenchman, 5 feet 4 inches; and of a Belgian, 5 feet 6¾ inches.

The average weight of an Englishman is 150 pounds; of a Frenchman, 136 pounds; and of a Belgian, 140 pounds.

A man breathes about twenty times in a minute.

A man breathes about eighteen pints of air in a minute, or upward of seven hogsheads in a day.

A man consumes 10.666 cubic feet of oxygen in 24 hours, which equals 125 cubic inches of common air.

The average of the pulse in infancy is 120 per minute; in manhood, 80; at 60 years, 60.

The weight of the circulating blood is about 28 pounds.

The heart beats seventy-five times in a minute, sends nearly 10 pounds of blood through the veins and arteries each beat, makes four beats while we breathe once.

One hundred and seventy-four million holes or cells are in the lungs, which would cover a surface thirty times greater than the human body.

Twenty-five hundred square inches

may be estimated as the surface of an ordinary-sized man's body.

There are about 7,000,000 pores in an ordinary sized man.

Each pore is about a quarter of an inch in length.

Three thousand five hundred and twenty-eight pores have been counted on one square inch of the palm of the hand.

There are 175,000 inches of pores—that is, 145,833 feet, or 48,600 yards (nearly 28 miles) of this drainage—in a human body.

One man can raise 10 pounds 10 feet in a second ten hours a day.

One ma can raise 100 pounds one foot in a second.

One man can draw on a level 640 pounds.

One man can lift with both hands 236 pounds.

One man can support on his shoulders 330 pounds.

Five men working ten hours a day equal one horse working eight hours.

Three men carrying 100 pounds each will descend a hill quicker than one horse carrying 300 pounds.

A man's strength is greatest in raising a weight when his weight is to that of his load as 4 is to 3.

A man may eat and drink heartily all day (says an unknown writer), and sit and lounge about, doing nothing, in one sense of the word, but his body must keep hard at work all the time, or it will die. Suppose the stomach refused to work within ten minutes after a hearty dinner? The man would die in convulsions in a few hours, or cholera or cramp colic would rack and wreck him. Supposing the pores of the skin—meaning thereby the glandular apparatus with which they are connected—should go on a "strike," he would in an hour be burning up with fever, oppression would weigh upon the system, and soon become insupportable. If the little workshops of the eye should close, in an hour he could not shut nor open them without physical force, and in another hour he would be blind; or if those of the tongue should close, it would become dry as a bone, and stiff as steel. To keep such a complication of machinery in working order for a lifetime is a miracle of wisdom, but to work them by the pleasures of eating and drinking is a miracle of beneficence.

THE TREATMENT OF INGROWN NAILS.

Paper Read at the Annual Meeting, Nov. 10, 1908.

BY JOSEPH RENK, NEW YORK.

Mr. President, Ladies and Gentlemen:

In treating an ingrown nail it is absolutely necessary to cleanse the toe thoroughly with a 5 per cent. carbolic solution, or a one in 2000 bi-chloride of mercury solution.

With a magnifying glass examine the affected part, meanwhile rendering aseptic such tools as are likely to be used, by placing them in absolute alcohol.

If it is necessary to remove a piece of the nail, make a starting point with the clippers, and insert a chisel at the free end, and gently force it apart, clean back to its root. Gently raise the loosened piece from the nail groove, and with an artery forceps clasp firmly near the root, and draw it out. Examine again carefully to see that no slivers remain, else the wound will not heal. If no hemorrhage results from removing the piece of nail, or if there is no wound of any kind, clean the groove with a 2½ per cent. carbolic solution, dry it out by forcing in cotton, after which dust with aristol, over which pack cotton.

If the flaps at the side of the nail are inflamed, bandage the toe with a one-inch gauze bandage, saturated with almuminum acetate (liquid borowii), and incase in a gutta percha protective.

If, however, in removing the ingrown piece of nail, blood has been drawn, or should there be an abrasion or a wound, however slight, apply a few drops of peroxide of hydrogen, allowing it to remain until the bubbling ceases. Then syringe with a 2½ per cent. carbolic solution, dry out the groove with cotton, then apply maargunt and a wet dressing of liquid borowii

At the end of twenty-four hours the toe should be again carefully examined. If the inflammation has abated and the wound shows signs of healing, simply syringe with warm water and fill the nail groove with boracic acid powder, after which put on a bandage to pre-

vent any foreign substance from coming in contact with the wound.

In case of ingrown nail with proud flesh, it is necessary to remove the ingrown part of the nail first. Then ligate the toe, snip off the proud flesh with a scissors, and apply the actual cautery. This is the most effective method of bring about a cure in the shortest possible time.

Some chiropodists use burnt alum, others use silver nitrate or nitric acid.

Any of these is apt to produce suppuration, besides, the pain resulting from their use lasts much longer than does that from the actual cautery, which is painful only for a second or less, at the time of application.

In treating ingrown nails where suppuration exists, care must be taken to remove all the pus. In such cases, wet dressings of bi-chloride of mercury, 1 in 5000, are indicated.

One important point in treating an ingrown nail is to study your patient. If he or she is healthy looking, the chances are very favorable for a speedy cure, as the blood in such persons usually contain the nutritive materials necessary to the quick repair of the tissues, but if the patient is emaciated or anaemic, and there is a possible chance of correcting the ingrown nail by means of "packing," it is advisable to make the attempt, rather than cutting out a piece of the nail, with the liability of producing a wound.

When ingrown nail patients come to have their toes redressed, avoid the use of strong antiseptics. These have a tendency to destroy the healthy granulations in a wound, and thus retard its healing. It is far better to syringe a wound with sterilized water, at any temperature, than to use carbolic or bi-chloride of mercury.

Very often it happens that a patient comes to have his toe dressed twenty-four hours after an operation. He tells you that he feels no pain whatsoever, and came only because he was ordered to do so. In such cases, the chiropodist should do naught but examine the digit. Put no instrument of any kind to it, simply encase in a new bandage, and instruct the patient to call again in two or three days.

I have tried to explain as best I could the manner in which I treat ingrown nails. Some of you may have methods which you think superior. These have sufficed in my practice, and I cheerfully give them for the benefit of the new chiropodists, who are passing the Pedic examinations, and I feel warranted in saying that if they follow the same methods of treatment, they will be rewarded with similar success.

JOSEPH RENK.

SEPTICEMIA.

(With apologies to the late Eugene Field.)

Upon the foot of a young girl grew,
Listen to my tale of woe,
A little corn of ashen hue,
Rubbed by her stocking and pressed by her shoe,
It grew, it grew—
Listen to my tale of woe.

Across that corn of ashen hue,
Listen to my tale of woe,
Came Doctor Fake and his corn knife too,
Cut it deep and the derma through,
And forgot his antiseptics too,
Listen to my tale of woe.

Under the sod where the daisies grew,
Listen to my tale of woe,
They planted girly and the clavus too,
While her little soul to the angels flew—
Boo hoo, boo hoo—
Listen to my tale of woe.

With an axe to the Doc. her father flew,
Listen to my tale of woe,
Busted up Doc, and his business too,
And now his mission on earth is through,
So don't let this occur to you, to you, to you,
I've finished my tale of woe.

THE CHIROPODIST AND THE PHYSICIAN.

BY ALFRED JOSEPH.

In these times of educational facilities, with the competition keen in the medical profession, due to the great number of doctors graduating from the colleges every year, and the sanitary regulations promulgated by the health authorities, thus keeping the death rate at a minimum, it is a small wonder that physicians are leaving the ranks of general practitioners and becoming specialists.

The family doctor of former days,

who, at your call, was ready to undertake anything from a splinter in the finger to a confinement case, is now a specialist. He has seen the wisdom of learning all the obtainable knowledge on one subject, and so thoroughly perfecting himself therein, that his skill and knowledge in his particular specialty are soon recognized, his services sought and munificently rewarded.

The chiropodist of to-day is a specialist, only he doesn't realize it; and not realizing it, of course, does not participate in the glory and remuneration which should be his.

In his calling of chiropody he wields his knife with such precision that no surgeon, howsoever famous, can equal him. The medical man may have achieved fame for his skill in the use of the scalpel; so delicate may be his poise that he is enabled to separate a diseased membrane from a vital organ; yet, nevertheless, when the true comparison is made, the decision must be in favor of the chiropodist. And when I say chiropodist, I do not refer to the individual who simply cuts or removes ingrown pieces of nail, but rather to those in the profession who have studied, and are studying continually, perfecting themselves in their art, thereby endeavoring to earn that recognition which their superior knowledge entitles them to.

That the general public recognizes the chiropodist as a specialist, is more evident each year. Where formerly a person suffering from fissured toe-webs went to a physician for treatment, he now looks to the chiropodist for a cure.

Apropos, I will relate an incident. One day a patient of one of our officers requested him to call on his wife, who was under a physician's treatment for a contused toe. Some heavy object had fallen thereon, and the medical man was doing all in his power to repair the injury, but without success.

The lady had been some weeks under treatment when the chiropodist was called in. With the skill characteristic of the man, he cut away about three-quarters of the nail, and discovered on the matrix a growth of superfluous granulation which the medical man never dreamed existed.

By cutting and cauterization, the chiropodist effected a cure in a very short time. The patient was delighted with his skill, and the physician expressed a desire to meet him. The chiropodist called on him, and in his usual intelligent manner, explained his diagnosis and treatment.

The physician (he is a "big gun," too) thought so well of the chiropodist that he sent several patients to him for treatment.

The incident above related should stimulate every chiropodist to study more of his profession.

I know of one chiropodist with a good practice, who is doing that very thing. He is learning the anatomy and physiology of the foot—not a mere smattering, but the complete knowledge. It is true that after he knows it he will not be able to treat a foot more skilfully than he does now; but he has an ambition to shine as a man of learning, and for that all honor is due him.

The chiropodist desirous of advancing himself in the profession can find no better medium than a regular attendance at the meetings of the Pedic Society.

Here he can obtain information pertaining to every disease of the foot, as well as a knowledge of the best remedies and appliances in vogue.

It is not necessary, although preferable, to participate in the debates which arise, for the silent listener can share equally with those that speak in learning things new to him.

The Pedic Society seeks the co-operation of every chiropodist. The aid of every individual is necessary, and every registered chiropodist should rejoice in a membership certificate. All that is necessary is a long pull and a strong pull, and we'll raise the standard of chiropody so high as was never dreamed of by those who were instrumental in procuring the statute regulating its practice.

AN EARLY EXPERIENCE.

Some time ago I read of an incorrigible boy being reclaimed by means of a surgical operation upon the brain, and that recalled to me an experience I had when I first commenced to practice chiropody. I know that every chiropodist has these trials and tribulations, but the outcome of this little event was so novel that it is well worth relating.

One of my patients was the owner of a large German beer emporium

which was the rendezvous for all the "crack-a-jack" pinochle and skat players of the district. Every Sunday I called to treat him. On several occasions he called my attention to an induration at the head of the fifth metacarpal bone of his right hand. I examined the spot, and while it looked like a corn and felt like one, I was afraid to apply the term, as I could not imagine how a corn would be apt to grow on the back of the hand.

Had I been acquainted with the habits of my patient I should have known how Germans like to play cards, and in the excitement of the game they strike the table with their knuckles. As a general thing wood is harder than flesh and bone, and the constant striking produced as fine a corn as any tight shoe.

Between deals, the German will sip his beer. After a time a drowsy feeling steals over him and he finds it necessary to take a nap. The following was the daily routine of my patient: Arise at noon, breakfast; pinochle until three; sleep to six; dinner, skat to twelve; supper; more skat or pinochle until two, then to bed.

One day the excrescence on the hand of my patient annoyed him more than usual, and he requested me to treat it also. I applied a liberal quantity of pure nitric acid to the hardened spot and continued the treatment for several consecutive days.

I have seen many serious wounds and nauseating eruptions during my practice, but if I live to be a hundred I will never again apply that quantity of nitric acid in a similar case. The acid ate into the tissue to the bone, and for six weeks my patient was a great sufferer and did not sleep for two nights.

Finally, granulation set in and when the wound had healed not a sign of the corn was visible. But when my German patient resumed his card playing, nothing could induce him to throw down his cards as formerly. The remembrance of the pain cured him of that habit, consequently, he had no more corns or callous on his hand.

FREDERICK JASMUND.

PAPIER FAYARD.

Of the many chiropodists who use Papier Fayard, there are few who know its composition. For years this was a closely guarded secret of the French manufacturers, who derived vast sums from the monopoly they enjoyed. From time to time American chemists tried to produce a paper which would equal that imported from France, but they never succeeded.

The Druggists' Circular for June, 1867, in an article entitled "Papier Chimique for Corns," gave the following formula:

Linseed oil.....	1 pound
Garlic	1½ ounces
Oil of turpentine.....	1 pound
Acetate of lead.....	2 ounces
Yellow wax.....	1 ounce
Red lead.....	½ ounce

The garlic is first boiled with the oil, then the remaining substances are added, and the liquid mass is applied on silk by means of a brush.

Papier Fayard (Gout Paper).—The following is the process given in the expired patent:

The paper is rendered waterproof in the following manner: Linseed oil, 500; finely chopped garlic, 30; turpentine, 500; acetate of lead, 50; yellow ochre, 30; red lead, 15. The garlic is boiled with the oil, and stirred continuously. It is then strained, and the other substances added. The resulting preparation is next spread on tissue paper, either with a sponge or a broad camel-hair pencil, such as is used by gilders, and allowed to dry at the ordinary temperature or in a heated room for about a fortnight. When the paper is dry spread the following mixture on it: Olive oil, 200 parts; yellow wax, 6 parts; red lead, 100 parts.

Another process is: Make a tincture with euphorbium, 3 drams; cantharides, 6 drams; mix these in 4 ounces of rectified spirits. In the filtered tincture dissolve 3 drams of Venice turpentine, and dip fine paper in the mixture. — Pharmaceutical Formulas.

MARVELOUS SKILL.

A chiropodist in Vienna advertises his skill as follows: "Chiropodist and Pedicure. Twenty-five years' experience. Have treated corns and bunions on many of the Crowned Heads of Europe."—Youth's Companion.

MADURA FOOT.

This disease is due to an organism, and is confined to tropical or semi-tropical countries, although a few cases have been observed in this country.

The infection seems to occur through a wound or abrasion, and manifests itself either on the plantar or dorsal surface of the foot or hand, producing a slowly progressive nodular swelling, subsequently destroying the soft structures and even the bones.

The disease being slowly progressive, the foot or hand becomes swollen, while the leg or arm is weak and atrophied. The patient finally dies from exhaustion.

In making the diagnosis, the physician must take into consideration the climate, the situation of the disease, the slow progressive character of the inflammation, and the recognition of the fungus masses.

The surgical treatment consists of excision of the diseased area, or incision followed by vigorous curettage and cauterization or amputation.

JUST AS GOOD AS EVER, TOO.

An old physician was noted for his brusque manner and old-fashioned methods. A lady called him into treat her baby, who was slightly ailing. The doctor prescribed castor oil.

"But, doctor," protested the young mother, "castor oil is such an old-fashioned remedy."

"Madam," replied the doctor, "babies are old-fashioned things." — London Opinion.

"Why is it," asked a member of the Pedic Society in conversation with Secretary Nachbar recently, "that a chiropodist who has passed an examination is taxed $15 for a certificate and $15 additional to become a member of the society, while those who claim to have practised before the law went into effect pay only $15 for both certificate and membership?"

The secretary scratched his head a moment, then said:

"For the same reason that a man who wants to get married must pay only a dollar for a license, while the man who wants to keep a dog must pay $2. Because it's the law."

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Read the following extract from a lecture by Dr. Alfred Joseph of New York City, before the New York Pedic Society.

For removing Warts, Moles and Vascular Corns there is nothing to equal it. Dr. Fred Schmitt of Brooklyn informed me of its merits, and the first time I tried it was on a woman's hand. She was possessed of over twenty warts, some of which disappeared after the first application and the balance after the second.

No scar or spot remained.

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APPROXIMATE SOLUTIONS.

One teaspoonful to one gallon equals 1-1000 solution.

One dessertspoonful to one gallon equals 1-500 solution.

One tablespoonful to one gallon equals 1-250 solution.

(An ordinary water pail holds about four gallons.)

One teaspoonful to one quart equals 1-250 solution.

One dessertspoonful to one quart equals 1-125 solution.

One tablespoonful to one quart equals 1-60 solution.

One teaspoonful to one pint equals 1-125 solution.

One dessertspoonful to one point equals 1-60 solution.

One tablespoonful to one pint equals 1-30 solution.

(A tumbler holds about half a pint.)

A NEW PROFESSION BORN—WHAT NEXT?

It is not a long way back to look for the time when dentists were merely barbers, and had no professional standing, while it is within much shorter time that the old "horse doctors," now veterinarians, have been recognized as professional men. Most law-making bodies now recognize both as professions, which, of course, is of legal effect, even though physicians and pharmacists may hold aloof in instances in lack of appreciation of the importance of these practitioners to those requiring their services. In New Jersey the list has been increased by the elevation of chiropody to the outer circle, that is, the legal status of the skilled professions, as if there could be any professional man who was not "skilled."

As a matter of fact there is no reason why the practice of chiropody should not be regulated by law, and there are a great many reasons which can be advanced in favor of it, as both druggists and doctors are well aware, although they may feel as reluctant to have "corn doctors" admitted to professional standing as they were to consider "herb doctors," " horse doctors" and the barbers who used to deal in medicines and leeches as entitled to professional recognition. Prejudice always governs hastily formed opinions in matters of this nature. A really skilled chiropodist is in his way a boon to humanity, and if there can be more of them and better ones through the elevation of the calling to a profession, whether it be done by law or by custom, the effect will tend toward the alleviation of much suffering and increase the number of good-natured people who are participants in our everyday life. Good nature, optimism and success are synonymous.—Pharmaceutical Era, Nov. 5. 1908.

COLD FEET.

The principal vein which brings back blood from the foot is called the internal or long saphenous vein. It begins on the inner side of the dorsum of the foot, and runs to the top of the thigh.

Tight garters will compress this vein, and thus check the circulation, resulting in deficient blood-flow in the feet.

Chilblains, frost bites, congestions and inflammations more easily occur, and the feet are more apt to become cold. If the garter is very tight, the veins below it often become so gorged with blood that their walls stretch and form swellings, known as varicose veins. These sometimes burst and cause dangerous hemorrhage. Frequently they so press and crush the surrounding tissues as to cause inflammation and sores.

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WILLIAM ARTUS

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STRICTLY GERM-PROOF.

The Antiseptic Baby and the Prophylactic Pup
Were playing in the garden when the Bunny gamboled up;
They looked upon the Creature with a loathing undisguised—
It wasn't Disinfected and it wasn't Sterilized.

They said it was a Microbe and a Hotbed of Disease.
They steamed it in a vapor of a thousand odd degrees;
They froze it in a freezer that was cold as Banished Hope,
And washed it in permanganate with carbolated soap.

In sulphureted hydrogen they steeped its wiggly ears;
They trimmed its frisky whiskers with a pair of hard-boiled shears.
They donned their rubber mittens and they took it by the hand
And 'lected it a member of the Fumigated Band.

There's not a Micrococcus in the garden where they play;
They swim in pure iodoform a dozen times a day;
He now imbibes his rations from a Hygienic Cup—
The Bunny and the Baby and the Prophylactic Pup.

—Arthur Guiterman, in Canadian Practitioner.

BRAIN PUZZLERS.

In this issue we begin the publication of a department entitled "Brain Puzzlers." Questions will be asked which the readers may answer. Consult your libraries, or try to obtain the information from learned persons, or any other source. We trust every reader will endeavor to solve these questions, and mail their answers to the Secretary. The correct answers will be published in the next issue.

1.—A man goes in bathing, clad only in a pair of tights. The day is hot and the sun shines brightly. He spends six hours lounging on the sands, taking an occasional dip in the water. He acquires an excessive case of sunburn, takes to his bed, and dies in a few days. What killed him?

2.—A man weighing 170 pounds is taken sick with typhoid fever. Two weeks later he weighs only 140 pounds. What became of the 30 pounds?

3.—Every living creature takes a supply of oxygen into the lungs at every inhalation, and throws out carbon dioxide when exhaling. As there are thousands of billions of living creatures all breathing at once, and as this condition has existed for thousands of years, how is it that the supply of oxygen hasn't been exhausted, and what becomes of the carbon dioxide which has been exhaled?

4.—What are the physiology of sensory nerve fibres and motor nerve fibres?

5.—What is the action of liquid borowli when applied to inflamed areas?

6.—Bones are compact externally and cellular or spongy internally. How do you account for their not being solid throughout?

7.—When nitrate of silver comes in contact with living tissue it oxidizes it, producing a black stain. What chemical compound is formed?

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A CHRISTMAS SUGGESTION.

Comfort one another,
For the way is often dreary,
And the feet are often weary,
And the heart is very sad.

There is a heavy burden bearing,
When it seems that none are caring,
And we half forget that ever we were glad.

Comfort one another,
With the hand clasp close and tender,
With the sweetness love can render,
And the looks of friendly eyes.

Do not wait with grace unspoken,
While life's daily bread is broken,
Gentle speech is oft like manna from the skies.

THE OLD-TIMER'S ADVICE.

A young man who recently passed the Pedic examination was seized with a desire to establish himself in the profession of chiropody. He had a good position, with a fair salary, and and prospects of advancement.

While he possessed a fair knowledge of the theoretical part of chiropody, the practical end of the business was strange to him. Why he should sacrifice his prospects in a business wherein he was a success for a profession which was new to him, is one of those unaccountable mysteries.

Perhaps he had seen some chiropodists riding around in touring cars; or others riding in the Subway, and concluded that there was money in the profession. At all events, he was seized with the chiropody "bug," and dropped into see several chiropodists, in the hope of picking up some points which might prove of benefit to him.

Among the men he saw was one of those old-timers, who had been in the business for forty years or more, and whose knowledge of the theory of chiropody was represented by zero; but when it came to the practice, he was "there with the goods."

During the conversation, the young man admitted that he knew but little of the practical part of chiropody, and thought that if he "plunged" in bodily, he might in a short time pick up the business. He concluded his remarks by asking the old-timer in what part of the city his chances were best.

The old-timer appeared to be in deep thought for a moment. Then, surveying the ambitious young man over the top of his glasses, he slowly said:

"Down by the banks of a little river in Georgia an old darkey used to row people across, for which service he charged three cents.

"One day a white man of dilapidated appearance came down to the river and asked to be rowed across.

"'The ferriage is three cents,' said the old darkey.

"'I haven't got any money,' said the white man.

"'What! exclaimed the ferryman, 'You haven't got three cents and you want to cross the river?'

"'No, I haven't got a cent and I want to get over on the other side.'

"'Well,' mused the old darkey, scratching his head, 'it appears to me that a man who hasn't got three cents is just as well off on one side of the river as on the other.'"

ELECTRICITY IN CHIROPODY.

BY GEORGE M. WEDEKIND.

If some of the chiropodists who practiced in the sixties and seventies could come to earth again, they would be astonished at the changes, both in men and methods, the profession has undergone.

To the active practitioner of to-day the customs of his predecessor look crude; and he finds himself wondering how, in former times, the chiropodist was able to treat his patients without the aid of the up-to-date machinery in vogue.

In those times electricity was in its infancy, and all the things electrical found in an up-to-date chiropodist's office were as yet undiscovered.

Even to-day there are few in the profession who have all the appliances. That each device has its use goes without saying. But there is a greater value attached to their possession, and that is: They are the best advertising

medium a chiropodist can have, next to his ability as a good operator. Patients will recommend a skillful chiropodist. But if one combines skill with a penchant for keeping abreast with the times by equipping his office with all kinds of applicable electrical devices, his patients will do more to advertise his business than would a campaign of newspaper publicity.

To equip an office with these useful appliances is of course a costly matter; but as it pays in the long run, that should be left out of consideration.

Here are some of the appliances of benefit in chiropody: Electrical motor with cable attachment, for drilling or filing nails. An emery wheel is used to file away the cuticle at the back of the nail. This is a work of two minutes, where by hand it occupies from twenty to thirty minutes.

Electric cautery to remove superfluous granulations. Ready for use at a moment's notice.

Electric battery to stimulate weak nerves.

Electric light on movable arm facilitates and makes possible operations at night or on dark days.

Electric controller with miniature lamp, enables one to look through the tissues for foreign objects.

Electric vibrator to stir up a sluggish blood circulation.

Electric foot warmer convenient in cold weather.

Electric fan a joy in summer.

Electric needle to destroy papilloma.

Besides these there is the compressed air for spraying antiseptics and cleansing purposes. Also a vacuum device which sucks up the dust and clippings from the floor.

Much favorable comment was caused by the publication in the April number of the Pedic Items of a photo-engraving of one of these up-to-date chiropody establishments.

It should be the aim of every member of the profession to procure the latest and best adapted appliances, and by that means compel his patients to act as walking advertisements for his business. And just as sure as the sun rises and sets, his receipts will increase, his patients multiply, and never will he have cause to regret the expense of the outfit.

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APPEAL FOR CO-OPERATION.

The up-State chiropodists who fail to attend at least three of the meetings, each year of the State Pedic Society, are missing an opportunity to gain much valuable and practical information. I, for one, have had a bug in my head (not in my hair), to have an opportunity to see where I was at, and could not think of a more pleasant and profitable source than at these meetings.

Here I could mingle and exchange methods of practice with others, resulting in material benefit, and more than repaying the time and expense of a trip to the great city.

Up-State chiropodists could not get such information from any other source.

Then, too, is the pleasure of meeting old friends, and gaining new ones. It is a delight to hear the witticisms of the president, as he so ably and so impartially presides. Everyone is given full opportunity for discussion.

In my opinion every chiropodist from Albany to Buffalo should be represented. Additional reasons I will give at the first opportunity which presents itself.

Now, gentlemen, get together and show by your cheerful co-operation that you appreciate what this solid body of men has done to uplift and rebuild the profession. Let them know the up-State chiropidists are alive to their best interests.

DANIEL M. HOGAN,
Albany, N. Y.

LOSES A LEG BECAUSE OF A BLISTER.

George Upington, publisher of the Brooklyn Directory, recently had his left leg amputated at St. John's Hospital. A couple of weeks ago a blister appeared on the sole of his foot and he had it removed by a chiropodist. The wound failed to heal and, gingrene setting in, the leg had to be amputated to save his life.

Always keep your revised rules and formulas for the proper use of antiseptics in the practice of chiropody in a conspicuous place. Read them often, so as to know how to intelligently treat the different conditions which present themselves to you. Such cases as above would be very rare.

"There's a printed card hanging in my office which offers some mighty good advice," said George W. Martin, general agent of the Rock Island-Frisco lines, according to *System*, in talking with some business friends. "It reads: 'Write Your Letter While Angry If You Must, But Don't Mail It Until the Next Day.'

"Every man now and then, I believe, feels that he must write a letter raising the mischief about something. I know I often feel that way. When that feeling comes over one he must get rid of it, and the only way to do so is to write the letter.

"I remember a young fellow who one time wrote a mean letter to his father. He sealed it and asked me to mail it for him. I simply dropped it in my pocket and let it stay there until the next day.

"The following morning he came in the office looking worried.

"'George,' he said, 'I wish I had never written that letter to the old gentleman. It will break his heart. I'd give $50 to get it back.'

"I pitched it out to him. 'There it is,' I said. 'I didn't mail it because I knew you'd be sorry about it.'

"Well, sir, that fellow actually wanted to pay me $50 for not mailing the letter. Yes, that card has some mighty good common sense on it."—Electrical Record, April, 1908.

PERTINENT.

—Some chiropodists have electrical devices to give their patients a shock;

others need only open their mouths to produce a like result.

—It is only the combination of theory and practice that makes the complete chiropodist. He that lacks the knowledge of one of these branches is like a bird with only one wing.

—Some chiropodists use shields and pads for the same reason that some women use them—to hide the defects in their works.

—"Five dollars for removing an ingrown nail!" indignantly exclaimed the patient. "Why, it only took you ten minutes to do it!"

"Quite true," said the chiropodist. "But it took me ten years to learn how to do it in ten minutes."

There could be no come-back to that argument, and the patient promptly paid.

PIGG, HOGG AND BACON MEET.

To the casual observer yesterday the register of the Savoy Hotel looked more like an inventory book of a packing house than a hotel register. Early yesterday morning a stranger entered the hotel and signed:

"J. R. Pigg, Windsor, Mo."

A few minutes later two men stepped up to the desk and signed just below Mr. Pigg's signature:

"C. B. Hogg, Canton, O." and "Brown Bacon, Chicago."

The three gentlemen who attached such strange names in juxtaposition were not acquainted with each other, but when the hotel clerk saw the strange signatures, the three gentlemen whose names atracted so much attention were eagerly sought by the curious, and it was but a short time before Messrs. Pigg, Hogg and Bacon were good friends.

Mr. Pigg said that he had nothing to do with any packing house, as he was a government mail contracter, of Windsor, Mo. Mr. Hogg said that he and Mr. Bacon were travelling men.—From the Kansas City Journal.

ANSWERS TO QUERIES.

Editor Pedic Items:

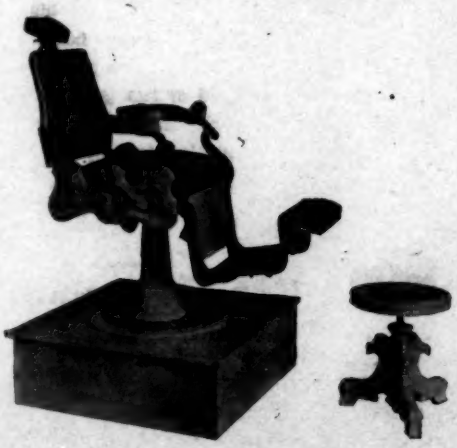
Will you kindly answer the following questions:

1.—Can infection occur in a contused wound?

2.—What are ptomaines?

3—What is the difference between aseptic and sterilization?

A YOUNG CHIROPODIST.



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1.—A contused wound is one in which the tissues under the skin have been crushed or broken, without abrasing the skin itself. As no micro-organisms can enter the unbroken surface of the skin, it is impossible for infection to set in.

2.—Ptomaines are the products that are formed in the course of the growth and multiplication of micro-organisms. They are poisons, and the result of their action upon the living tissues with which they come in contact constitute sepsis.

3.—When anything is made aseptic, chemicals are employed for the destruction of the germs. In sterilization the germs are destroyed by heat, as, for instance, boiling water or steam.

A GOAT IDYL.

Dr. Johnson, a friend of mine,
Hung three red shirts upon a line.
Now, what else do you think our doctor did,
But buy a goat for his only kid?
One day this goat, while roaming round,
Spied those red shirts and ate them down.
The doctor was mad, and cursed and swore
That he would have the old goat's gore.
So he led him to the railroad track,
And tied him there upon his back,
Leaving him in this sorry plight,
Just as a freight train hove in sight.
"Say Au revoir, but not good-bye!"
This goat was far too cute to die.
He strove with all his might and main—
Coughed up those shirts and flagged the train!

HUMAN NATURE.

"I knew a feller once that had
The yeller jaunders awful bad, and
Each and every one he'd meet, would stop and
Give him some receet for curin' of them.
But, he'd say, He kinder guessed they'd go away,
Without no medicine, and boast
That he'd get well without one dost.
And so he kept a yellering on, and they
Predictin' that he'd die some day
Before he knowed it. Tuk his bed,
The feller did, and lost his head,
And wandered in his mind a spell,
And rallied and at last got well.
But every one that said he'd die
Went back on him eternally."

JAMES WHITCOMB RILEY.

Dr. Alfred Joseph CHIROPODIST
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